

DECLARATION OF DEBRA STANDRIDGE

I, Debra Standridge, declare as follows:

1. I am a resident of the State of Wisconsin. I am over the age of 18 and have personal knowledge of all the facts stated herein, except to those matters stated upon information and belief; as to those matters, I believe them to be true. If called as a witness, I could and would testify competently to the matters set forth below.
2. I am currently employed by the Wisconsin Department of Health Services (WI-DHS) as Deputy Secretary.
3. As Deputy Secretary, I oversee grants that we receive, including those from the Centers for Disease Control and Prevention (CDC) and the Substance Abuse and Mental Health Services Administration (SAMHSA).
4. Our agency received six award terminations from the CDC and SAMHSA. The total value of the terminated awards was \$225 million in unspent dollars.
5. All CDC terminations were “for cause” based on the end of the COVID pandemic, rather than failure of WI-DHS to follow the terms or conditions of the grants. Each CDC award termination uses the same identical form language stating: “The termination of this funding is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out.” Descriptions of each award and the effects of these terminations follow.

6. All SAMHSA terminations were also based on the end of the COVID pandemic, rather than failure of WI-DHS to follow the terms or conditions of the grants. Each SAMHSA award termination uses the same identical form language stating: “On April 10, 2023, President Biden signed PL 188-3 terminating the national emergency concerning the COVID-19 pandemic. Consistent with the President’s Executive Order 14222, Implementing the President’s ‘Department of Government Efficiency’ Cost Efficiency Initiative requiring a comprehensive review of SAMHSA grants, and where appropriate and consistent with applicable law, terminate such grants to reduce the overall Federal spending this grant is being terminated effective March 24, 2025. These grants were issued for a limited purpose: To ameliorate the effects of the pandemic. The end of the pandemic provides cause to terminate COVID-related grants. Now that the pandemic is over, the grants are no longer necessary.”

Supplemental Funding Under the Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases

7. In 2018, CDC awarded WI-DHS Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) grant.
8. In 2020, during the COVID-19 public health emergency, CDC awarded WI-DHS approximately \$137,000,000 in supplemental funding under the ELC grant. Unlike the process for most grants, in this emergency case, CDC awarded the funding and asked WI-DHS to submit an initial plan for how to use this money within 30 days of receipt. In 2021, WI-DHS was awarded a further supplement to the ELC grant of \$335,000,000. Similarly, WI-DHS was asked to develop an initial plan for how to use this funding within 60 days of receipt.

9. WI-DHS's initial plans in 2020 and 2021 focused on lab development and directly supporting community testing.
10. Since the initial funding in 2020 and 2021, several modifications have been made to the grant supplements. In recent years, in response to CDC priorities and in collaboration with CDC, WI-DHS focused the use of the ELC grant supplemental funding to support and improve public health labs and data modernization.
11. As of the most recent modifications, funding was expected to end July 2026. DHS did not intend to seek an extension of the grant.
12. On July 18, 2019, CDC produced a Notice of Award setting forth the terms and conditions of the 2019 ELC grant award. A true and correct copy of the corresponding Notice of Award and its attachments, dated July 18, 2019, is attached as Exhibit A. On May 18, 2020, CDC produced a Notice of Award setting forth the terms and conditions of the \$137,000,000 in supplemental funding under the ELC grant. A true and correct copy of the corresponding Notice of Award and its attachments, dated May 18, 2020, is attached as Exhibit B. On January 14, 2021, CDC produced a Notice of Award setting forth the terms and conditions of the \$335,000,000 in supplemental funding under the ELC grant. A true and correct copy of the corresponding Notice of Award and its attachments, dated January 14, 2021, is attached as Exhibit C. Each of these incorporate the CDC General Terms and Conditions for Non-Research Awards; a true and correct copy of the most recent version, dated February 28, 2025, is attached as Exhibit D. As set forth therein, termination of the grant by CDC is permitted only consistent with 45 CFR 75.372: if a recipient or subrecipient fails to comply with the terms and conditions of the award, for cause, or with the agreement of the recipient/subrecipient.

13. Since 2020, WI-DHS has used the ELC grant funds in a manner fully consistent with CDC's statements regarding the nature of the grant and WI-DHS's grant application and modifications.
14. As of March 24, 2025, WI-DHS has approximately \$165,000,000 in unspent supplemental funds. Those funds are for continued work to address gaps and limitations in our public health infrastructure experienced during the COVID-19 pandemic (data infrastructure modernization and interoperability) and to strengthen our infrastructure for future pandemics. Timely, efficient, and effective response to outbreaks relies on modern data systems that talk to one another and laboratories that are accessible.
15. WI-DHS was instructed by HHS that funds could be used for purposes broader than COVID, such as other respiratory diseases and data modernization.
16. On or about March 24, 2025, without any prior notice or indication, CDC informed WI-DHS that effective immediately its ELC funding was being terminated as of March 24, 2025, as to "any remaining COVID-19 funding associated with this award." No further explanation as to which aspects of the award constituted "COVID-19 funding" was provided. A true and correct copy of the first grant award termination notice is attached as Exhibit E.
17. On March 25, 2025, CDC reissued the termination notice, this time providing no information at all as to which aspects of the grant were terminated nor the basis for termination. A true and correct copy of the second grant award termination notice is attached as Exhibit F.
18. The purported basis of the March 24, 2025 termination was "for cause." The first termination notice stated that "[t]he end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over,

the grants and cooperative agreements are no longer necessary as their limited purpose has run out.” *See* Exhibit B.

19. WI-DHS relied and acted upon its expectation and understanding that HHS would fulfill its commitment to provide ELC funding it had awarded to WI-DHS. 85 WI-DHS employees support the work under the ELC grant. Sub-contractors include public health laboratories.

20. The sudden termination of this funding will have several adverse results including:

- a. Pause or termination of planned project to shift reporting from multiple systems into a streamlined, cloud-managed environment that would improve our ability to provide timely data to local and tribal partners and the public.
- b. Loss of staff supporting PHAVR, a reporting system about diseases impacting Wisconsinites. This system is used by local health departments in response to investigations into food or waterborne diseases, illnesses from tick bites, and other infectious diseases. This data is also used for publicly available data dashboards used to inform the public, policy makers, local health departments and more about opioid overdoses. The assigned staff were terminated, which will result in delayed responses and management of the system and ultimately could lead to delayed response to public health threats.
- c. Ending of project to support local and Tribal data infrastructure needs. Data is essential to understanding what health threats exist in Wisconsin and ensuring coordinated responses. WI-DHS just concluded an assessment of the needs of local and Tribal health departments related to

data infrastructure, and may need to pause efforts to address these needs and improve coordination, collaboration, and public health response statewide.

- d. Wisconsin Cancer Reporting System (WCRS), which collects, manages, and analyzes cancer data for Wisconsin residents, was being upgraded to a data management system that would expand the types of data collected, increases interoperability with other data systems, and reduces staff efforts while improving data quality. WI-DHS anticipated reduced staff labor costs once this system was upgraded, alongside better collection of more real-time cancer data to support surveillance and research. We no longer expect to be able to fund these upgrades, which means more manual processes, slower cancer reporting, and decreased ability to get current data out to cancer researchers which will slow their ability to improve cancer detection, treatment, and prevention.
- e. Due to loss of funding, Wisconsin State Lab of Hygiene (WSLH) will be unable to secure funding for new instruments needed to provide Wisconsin's public health and health systems with laboratory capacity, as well as support instruments currently in use as well as more cost-effective multi-year maintenance contracts for high-complexity lab instruments. These multi-year contracts provide a cost savings of hundreds of thousands of dollars over annual contracts. If equipment is not maintained and certified according to federal regulatory guidelines, equipment will be

shut down and unavailable for testing, which will provide a negative impact on disease detection, patient care, and disease prevention.

- f. Multiple laboratory tests performed at WSLH will be adversely impacted, including multi-target respiratory pathogen panel (RPP) that detects over 20 of the most common respiratory pathogens infecting humans. This testing is costly, and WSLH will be forced to halt this testing or halt testing for other illnesses to shift funding. Another test directly impacted by termination of COVID funding is SARS CoV-2 sequencing. WSLH is reliant on COVID funding for this testing. Sequencing for SARS CoV-2 will need to be greatly reduced or eliminated, leading to a loss of this valuable data and loss of information about circulating strains and their development of resistance to antiviral treatments, directly impacting patient care. Additionally, many analytical supplies and reagents have been purchased with the expectation that funding would be available until July 2026. Tens of thousands of dollars in reagents and supplies may go unused and discarded due to loss of testing.

21. Prior to the grant award termination on March 24, 2025, CDC had never provided WI-DHS with notice, written or otherwise, that the grant administered by WI-DHS was in any way unsatisfactory.

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises (STLT Response Grant)

22. In 2021, the Department of Health and Human Services, CDC invited applications for Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises (STLT Response Grant).

23. As set out in its grant proposal, WI-DHS intended to use the STLT Response Grant to support populations that had significant negative impacts from the COVID pandemic. Projects included those related to addressing long-term negative health impacts from the pandemic, strengthening emergency medical services (EMS), improving data systems, and harm reduction.
24. In May 2021, WI-DHS was awarded approximately \$27,184,789. Initially, the grant term end date was May 2023, but extensions resulted in an expected termination date of May 31, 2026.
25. On May 27, 2021, CDC produced a Notice of Award setting forth the terms and conditions of the grant award. A true and correct copy of the corresponding Notice of Award and its attachments, dated May 27, 2021 is attached as Exhibit G. This Notice of Award incorporates the CDC General Terms and Conditions for Non-Research Awards; a true and correct copy of the most recent version, dated February 28, 2025, is attached as Exhibit D. As set forth therein, termination of the grant by CDC is permitted only consistent with 45 CFR 75.372: if a recipient or subrecipient fails to comply with the terms and conditions of the award, for cause, or with the agreement of the recipient/subrecipient.
26. Since May 2021, WI-DHS has used the STLT Response grant funds in a manner fully consistent with CDC's statements regarding the nature of the grant and WI-DHS's grant application.
27. STLT Response funding has been used for various projects, including to stand up a harm reduction strike team, to expand rural health initiatives, and to build out EMS infrastructure in areas where WI-DHS identified a gap in need, especially in rural areas.

28. As of March 24, 2025, approximately \$4,000,000 in STLT Response funding remains unspent.
29. On March 25, 2025, without any prior notice or indication, CDC informed WI-DHS that effective March 24, 2025 its STLT Response grant was being terminated. A true and correct copy of the grant award termination notice is attached as Exhibit H.
30. The purported basis of the termination was “for cause.” The termination stated that “[t]he end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out.” *See* Exhibit H.
31. WI-DHS relied and acted upon its expectation and understanding that CDC would fulfill its commitment to provide STLT Response grant funding it had awarded to WI-DHS. Sub-contractors include cities, counties, villages and tribal nations who have also relied on the expectation of these funds.
32. The elimination of this funding will result in termination of projects related to harm reduction and strengthening EMS.
33. For example, the following personnel were funded via the STLT Response grant and played critical roles in supporting Wisconsin’s EMS system:
- a. EmPOWER program manager: WI-DHS’s Office of Preparedness and Emergency Health Care (OPEHC) Health Equity Strategist managed the emPower program in Wisconsin. This federal program provides data to help communities identify Medicare beneficiaries who rely on electricity-

dependent medical equipment and health care services. This data is used to conduct outreach to these populations during local incidents such as extended power outages or large-scale emergencies or disasters.

- b. Community EMS Coordinator: The Community EMS Coordinator facilitated collaboration with partners to address the unique needs of their community. Community Emergency Medical Services (CEMS) programs facilitate integration with primary care services, reduce hospital readmissions, and re-route unnecessary emergency department visits to effectively mitigate health care needs and to improve efficiency in the system.
- c. EMS Compliance Coordinator: The OPEHC EMS Section is responsible for investigating all complaints against EMS services, practitioners, and training centers. This position is responsible for ensuring that investigations into complaints are managed according to Wisconsin State Statute.
- d. EMS/Preparedness Data Coordinator: Data is a pivotal part of the EMS system. This position is responsible for data management, analysis, integration, and maintenance including for the Wisconsin Ambulance Run Data system. This data system offers each ambulance service in Wisconsin the ability to track their ambulance run data alongside quality improvement data.

34. In communities across the state, EMS providers invested the funds to support improved partnership with health systems and local public health systems and services to provide

comprehensive care and support improved health outcomes for community members who recently had strokes. The goal of each program was to provide mobile integrated health visits to these patients to reduce hospital readmissions, support improved health outcomes, and improved quality of life. This includes:

- a. De Pere Fire Rescue (serving City of De Pere, Town of Lawrence, Town of Ledgeview, some of Village of Ashwaubenon).
- b. Door County Emergency Services. In addition to supporting the mobile integrated health visits, this funding helped build a foundation for Door County to build out a community paramedic program, which is now being state certified.
- c. Greenfield Fire Rescue. In addition to the mobile integrated health visits, this project also allowed Greenfield Fire Rescue to model their community paramedicine/mobile-integrated health program for other communities who were just launching similar efforts, which brought foundational learnings to the programs.

35. Wisconsin's statewide trauma care system reduces death and disability from traumatic injuries by ensuring that health systems across the state can provide the best possible care to trauma patients and their families. During the COVID-19 pandemic health systems throughout Wisconsin experienced staffing shortages that cause delays in mandated reporting to the Wisconsin Trauma Registry and gaps in documentation for trauma programs. These gaps are critical to fill to ensure that trauma systems can effectively respond to their community's health care needs. This disproportionately impacted rural and critical access hospitals that serve as level 3 and level 4 trauma hospitals that ease the burden on large

systems, and improve patient outcomes by keeping people in their communities. In response to the staffing shortages, OPEHC brought on a trauma nurse consultant to serve as a technical advisor to service providers. This staff person helped health systems develop, revise, and update nursing program plans; provided comprehensive program review, technical assistance, and training to trauma coordinators seeking certification and renewal of their trauma departments; and assisted with the site visit process related to trauma center classification. Due to these funding cuts, this consultant position has now been terminated.

36. Prior to the grant award termination on March 24, 2025, CDC had never provided WI-DHS with notice, written or otherwise, that the grant administered by WI-DHS was in any way unsatisfactory.

Wisconsin Community Health Workers for COVID Response and Recovery

37. In 2021, the Department of Health and Human Services, CDC invited applications for a Wisconsin Community Health Workers for COVID Response and Recovery (CHW) grant.
38. The purpose of the CHW grant was to support and sustain a network of community health workers, who are trusted messengers in their community. As trusted messengers, community health workers made a significant difference in sharing information and resources with communities facing some of the worst impacts of the COVID pandemic. They were able to support testing, treatment, and vaccination education and action as well as accessing other resources.
39. The CHW grant had a period of performance from August 2021 to August 2024, with a 12-month no-cost extension resulting in a close out date of August 30, 2025. During this time, CDC committed to a total of \$9,000,000 in funding.
40. On August 23, 2021, CDC produced the initial Notice of Award setting forth the terms and conditions of the grant award. A true and correct copy of the corresponding Notice of Award

and its attachments, dated August 23, 2021, is attached as Exhibit I. CDC issued Notices of Award annually for this funding each subsequent year. Each of these incorporate the CDC General Terms and Conditions for Non-Research Awards; a true and correct copy of the most recent version, dated February 28, 2025, is attached as Exhibit D. As set forth therein, termination of the grant by CDC is permitted only consistent with 45 CFR 75.372: if a recipient or subrecipient fails to comply with the terms and conditions of the award, for cause, or with the agreement of the recipient/subrecipient.

41. Since August 2021, WI-DHS has used the CHW grant funds in a manner fully consistent with CDC's statements regarding the nature of the grant and WI-DHS's grant application.
42. WI-DHS has used the CHW grant funds to build community health worker infrastructure in areas and for populations with health disparities, including rural areas, farm workers, low-income families, seniors, people with chronic conditions, etc. The funding provided trainings to community health workers, trainings to organization that could support community health workers, direct dollars to organizations that could hire community health workers, all in an effort to build infrastructure and to bring community health workers into care teams.
43. As of March 24, 2025, WI-DHS had approximately \$1,500,000 remaining in funds, to be spent by August 2026.
44. WI-DHS had no performance issues and HHS has not expressed any performance concerns, over the life of the grant.
45. On or about March 24, 2025, without any prior notice or indication, CDC informed WI-DHS that effective March 24, 2025 its CHW grant was being terminated as of March 24, 2025. A true and correct copy of the grant award termination notice is attached as Exhibit J.

46. The purported basis of the termination was “for cause.” The March 24, 2025 termination stated that “[t]he end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out.”
47. WI-DHS relied and acted upon its expectation and understanding that HHS would fulfill its commitment to provide CHW grant funding it had awarded to WI-DHS.
48. The termination of the CHW grant will result in a loss of support for training and development of community health workers, including support that established a Wisconsin Association of Community Health Workers. Since 2022, sites across the state have trained more than 300 community health workers in core competency training.
49. The termination will also eliminate direct funding of community health workers by organizations, reduce public education and awareness.
50. Prior to the grant award termination on March 24, 2025, CDC had never provided WI-DHS with notice, written or otherwise, that the grant administered by WI-DHS was in any way unsatisfactory.

Supplemental Funding to Immunization and Vaccines for Children grant: HHS Bridge Access Program, IIS Modernization and Vaccine Confidence

51. In June 2019, WI-DHS was awarded an Immunization and Vaccines for Children grant by the Department of Health and Human Services, CDC.
52. In September and December 2020, CDC utilized that Immunization and Vaccines for Children umbrella grant funding stream to provide emergency funding to WI-DHS in response to the COVID pandemic. Again, in January 2021 and March 2021 CDC utilized that Immunization and Vaccines for Children umbrella grant funding stream to provide

emergency funding to WI-DHS. The total for those supplemental funding issuances is \$115,214,185.

53. This supplemental funding was intended to be used to modernize and maintain public health data infrastructure, including the Wisconsin Immunization Registry (WIR). As part of COVID response and recovery, planning for Immunization Registry modernization was underway. The original system was established in 2000 and relies heavily on vendor development to make most changes or improvements. The goal of modernization was to move to a system that had a higher level of configurability so that changes needed in response to changing vaccine requirements, new inventory types, and provider registration types could be configured by the Wisconsin support team rather than expensive charges to a vendor. In addition, the volume of data exchange between providers, pharmacies and other vaccine provider types has continued at the higher COVID volume to this day, necessitating a larger data exchange staff than was needed pre-COVID.
54. In February 2025, WI-DHS submitted a request for the remaining \$12,000,000 of COVID funds not yet requested, as well as a no-cost extension for all funds for a two-year period to end in 2027. That request has not yet been approved. Absent that approval, the current close date for this funding was June 30, 2025.
55. The supplemental funding generated five separate Notices of Awards to be issued by CDC in 2020 and 2021, all of which incorporate the same termination language, found through a link and attached hereto as Exhibit D.
56. Since 2020, WI-DHS has used the Supplemental Funding for HHS Bridge Access Program, IIS Modernization and Vaccine Confidence grant funds in a manner fully consistent with CDC's statements regarding the nature of the grant and WI-DHS grant application.

57. Funding to date has been used for projects including the updating and ongoing maintenance of WIR, creating interoperability between WIR and other data, supporting local health departments and other local partners in vaccinating Wisconsinites, and generally modernization Wisconsin's health data system.
58. In the Single Audit A-05-23-66305 by CDC for CFDA 93.268, for the Fiscal Year Ended June 30, 2022: There was one finding: DHS did not comply with Federal Funding Accountability and Transparency Act (FFATA) requirements. FFATA requires federal agencies and prime grantees to report subaward information for subrecipients, through a single, publicly accessible website. The audit found that WI-DHS failed to report those specific sub-recipient awards, in the audit finding, in a timely manner to the FSRS federal website. Since November of 2022 there have been timely monthly uploads of collected data and it has continued to be reported monthly. This finding did not threaten the funding of these supplemental awards and CDC indicated that WI-DHS had corrected the issue to their satisfaction.
59. WI-DHS used the funds for COVID vaccine activities until it was permitted to broaden areas of focus to other vaccines (e.g., all childhood vaccines) and areas of focus, with approval from the CDC.
60. On or about March 24, 2025, without any prior notice or indication, CDC informed WI-DHS that effective March 24, 2025 its Supplemental Funding for HHS Bridge Access Program, IIS Modernization and Vaccine Confidence was being terminated as of March 24, 2025. A true and correct copy of the grant award termination notice is attached as Exhibit L.
61. The purported basis of the termination was "for cause." The termination stated that "[t]he end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to

ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out.”

62. WI-DHS relied and acted upon its expectation and understanding that HHS would fulfill its commitment to provide Supplemental Funding for HHS Bridge Access Program, IIS Modernization and Vaccine Confidence funding it had awarded to WI-DHS. Approximately \$8.5 million dollars in funding was supporting 142 different organizations/employers throughout Wisconsin, affecting nearly every county. These organizations include nearly all local and tribal health partners, federally qualified health centers, 25 community-based organizations serving 40 counties in routine Immunization through Community Engagement and other community organizations such as the Wisconsin Literacy Inc, Milwaukee Consortium for Hmong Health, We All Rise African American Resource Center, Aging and Disability Resource Center of the Northwoods.

63. In addition to pulling funding from those partners, loss of funding will mean fewer staff supporting WIR, which leads to longer wait times for end user problem resolution and extended the wait time for new providers to set up a data exchange feed. Lack of staffing will reduce the accuracy of immunization data in the system and ultimately lead to more people to get over or under immunized due to the missing information. Loss of funding for a new, modernized system means we continue to have to more expensive vendor change costs, a lengthened time to implement the changes, on a framework that was designed in 2000.

64. Prior to the grant award termination on March 24, 2025, CDC had never provided WI-DHS with notice, written or otherwise, that the grant administered by WI-DHS was unsatisfactory.

Substance Abuse Prevention & Treatment Block Grant, APRA Supplemental Funding – B08TI083973

65. In 2021, the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) invited applications for the American Rescue Plan Act (ARPA) Supplemental Funding for the Substance Abuse Prevention and Treatment (SABG) Block Grant Program.
66. The SABG ARPA supplemental funds provided additional funds through the SABG Grant Program to support states in addressing the effects of COVID-19 pandemic for Americans with mental illness and substance use disorders. The SABG allocation requires states to expend not less than 20% of their total allocation for substance use disorder primary prevention services for individuals who do not require treatment for substance abuse and requires designated states to expend 5% of their total allocation for EIS/HIV Services.
67. As set out in its grant proposal, WI-DHS intended to use the SABG ARPA supplemental funds to support the following efforts:
- County System Supports – provide funds directly to Wisconsin’s 72 counties to allow each county to utilize SABG ARPA funds to address their own unique needs.
 - Tribal Supports – provide funds to each of the 11 Federally recognized Tribal Nations in Wisconsin to allow them to address substance use disorder needs that have arisen from the COVID-19 pandemic.
 - Crisis Services – provide funds to counties and non-profits in Wisconsin to expand and enhance Wisconsin’s crisis system.
 - State Operations – utilize funding to support programmatic staffing for administration and implementation.

- Harm Reduction – expand investment in harm reduction techniques, including Narcan expansion in jail facilities, Naloxboxes, EMS leave behind programs, and distribution of Narcan with law enforcement.
- Prevention Activities – utilize funding to support several prevention activities, including tobacco prevention, youth substance use prevention, and expansion of regional crisis centers focusing community prevention supports and communities and coalitions primary substance use prevention work.
- Women’s Treatment Services – provide funds to support the expansion of women’s and family treatment residential settings and care coordination.
- Recovery Support/Peer Support Expansion – provide funds to support additional substance use/co-occurring peer run respite and peer run centers and to support the training and expansion of peer specialists and recovery coaches.
- Data Dashboard/Data Development Initiatives – utilize funding to improve and enhance data systems to monitor outcomes related to opioid epidemic initiatives.
- Telehealth Expansion for Medication Assisted Treatment (MAT) – provide funds to support infrastructure development for MAT telehealth.

68. SAMHSA awarded WI-DHS a SABG Block Grant, ARPA supplemental funds in the amount of \$22,016,587 for the period of September 1, 2021 through September 30, 2025.

69. On May 17, 2021, SAMHSA produced a Notice of Award setting forth the terms and conditions of the grant award. A true and correct copy of the corresponding Notice of Award and its attachments, dated May 17, 2021, is attached as Exhibit M. As set forth therein, the Award was subject to 42 U.S.C. 300x-21-300x-35 and 300x-51-300x-67, as amended.

Pursuant to 42 U.S.C. §300x-55, termination of the grant by SAMHSA is permitted only if,

subject to adequate notice and appeal requirements, “the Secretary determines that a State has materially failed to comply with the agreements or other conditions required for the receipt of a grant under the program involved.”

70. Since September 2021, WI-DHS has used the SABG Block Grant, ARPA supplemental funds in a manner fully consistent with SAMHSA’s statements regarding the nature of the grant and WI-DHS’s grant application.
71. As of March 24, 2025, WI-DHS had \$6,697.827.21 remaining in SABG Block Grant, ARPA supplemental funds committed by HHS, with a performance end day of September 30, 2025. WI-DHS disperses grant awards to local providers through a competitive procurement process. WI-DHS reimbursement process is automated. Expenses are posted daily and WI-DHS then draws the funds down a minimum of once per week, though the draw downs are usually also done daily. Once the draw down is requested, the funds typically take a couple of days to post to WI-DHS’s system.
72. WI-DHS met with the SAMHSA Grant Program Officer quarterly. WI-DHS received positive feedback regarding how the funding was assisting local providers and communities. WI-DHS and the SAMHSA Grant Program Officer had ongoing discussions about the various supplemental funding sources being used and how WI-DHS was managing the overall timelines for each. To accommodate spending down other grants with earlier end dates, WI-DHS planned to use a portion of the SABG ARPA supplemental funding in 2025. WI-DHS and SAMHSA Grant Program Officer discussed SAMHSA’s preference to spend more SABG ARPA supplemental funding prior to 2025, however, this was not an option with accommodating multiple grant timelines.

73. On or about March 24, 2025, without any prior notice or indication, SAMHSA informed WI-DHS that effective March 24, 2025 its SABG Block Grant, ARPA supplemental funds was being terminated as of March 24, 2025. A true and correct copy of the grant award termination notice is attached as Exhibit N. The March 24, 2025 termination notice cited the President's Executive Order 14222, Implementing the President's "Department of Government Efficiency" Cost Efficiency Initiative.
74. On March 28, 2025, WI-DHS staff received an email stating "The termination of this award is for cause. The block grant provisions at 42 U.S.C. §300x-55 permit termination if the state "has materially failed to comply with the agreements or other conditions required for the receipt of a grant under the program involved." The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out." A true and correct copy of the March 28, 2025 grant award termination email is attached as Exhibit O.
75. WI-DHS relied and acted upon its expectation and understanding that HHS would fulfill its commitment to provide SABG Block Grant, ARPA supplemental funds funding it had awarded to WI-DHS. WI-DHS has contracts with local service providers in the amount \$19,487,226.80. Providers assumed this funding was secure and are unsure how to continue providing mental health and substance use treatment services to adults and children. Abruptly ending services to adults and children can result in harm to their health and safety. Several agencies have reporting ending or reducing their services and terminating their staff immediately.

76. For example, one subrecipient, who provides respite services to promote participants' self-directed recovery, improve their quality of life, and reduce their need for use of crisis services, has had to immediately reduce their services from seven nights per week to just four nights per week, resulting in the displacement for those three additional nights of the residents in respite care.
77. Another respite house subrecipient was shut down upon notification about terminated funding, eliminating twelve staff and four guests staying at their facility.
78. Another subrecipient was an organization that provides residential substance use disorder program and additional services necessary to provide treatment to pregnant women and infants. The loss of funding for pregnant women and their infants will have a profound and devastating impact on this program. The funding was crucial for providing comprehensive care and support to one of the most vulnerable populations, including:
- a. **Reduced Access to Essential Services:** Pregnant women with substance use disorders require specialized medical, psychological, and social support. The loss of funding will limit their access to prenatal care, addiction treatment, mental health services, and postnatal support, increasing the risk of adverse outcomes for both mothers and infants
 - b. **Increased Health Risks:** Without adequate funding, we cannot provide the necessary interventions to mitigate the health risks associated with substance abuse during pregnancy. This can lead to higher rates of preterm births, low birth weights, developmental issues, and neonatal abstinence syndrome

- c. Strain on Existing Resources: Our program relies on this funding to maintain staffing levels and resources needed to deliver high-quality care. The reduction in funding will strain our existing resources, potentially leading to staff burnout and a decrease in the quality of care provided
- d. Long-term Societal Impact: The lack of support for pregnant women with substance use disorders can have long-term consequences for society. Children born to mothers who do not receive adequate care are at higher risk for developmental delays and behavioral issues, which can affect their educational outcomes and future opportunities
- e. Increased Stigma and Barriers to Care: The loss of funding may also exacerbate the stigma associated with substance use during pregnancy, making it even more difficult for women to seek help. This can lead to a cycle of untreated addiction and mental health issues that affect entire families

79. Additionally, there are five contracts for SABG Block Grant, ARPA supplemental funding that were not fully executed prior to the termination date but work had already begun; it is unknown if these agencies will be paid for this work.

80. Prior to the grant award termination on March 24, 2025, SAMHSA had never provided WI-DHS with notice, written or otherwise, that the grant administered by WI-DHS was in any way unsatisfactory.

Community Mental Health Services Block Grant - American Rescue Plan Act (ARPA) Plan Award

81. In 2021, the Department of Health and Human Services, SAMHSA invited applications for Block Grants for Community Mental Health Services under the American Rescue Plan Act (ARPA) (MHBG-APRA).
82. As set out in its grant proposal, communities across Wisconsin and the country had been negatively impacted by the pandemic due to the loss of life, short-term as well as lasting effects on health, and disrupted social connections. The inequities existing in populations across Wisconsin were highlighted during the COVID-19 pandemic across the continuum of care in the areas of prevention, intervention, access to crisis services, treatment, and recovery support services. WI-DHS intended to use the Block Grants for Community Mental Health Services in those areas of prevention, intervention, access to crisis services, treatment, and recovery support services, including for crisis call centers, crisis mobile response teams, stabilization and other mental health services.
83. On May 17, 2021, SAMHSA produced a Notice of Award setting forth the terms and conditions of the grant award. A true and correct copy of the corresponding Notice of Award and its attachments, dated May 17, 2021, is attached as Exhibit P. As set forth therein, the Award was subject to 42 U.S.C. 300x-21-300x-35 and 300x-51-300x-67, as amended. Pursuant to 42 U.S.C. §300x-55, termination of the grant by SAMHSA is permitted only if, subject to adequate notice and appeal requirements, “the Secretary determines that a State has materially failed to comply with the agreements or other conditions required for the receipt of a grant under the program involved.”
84. Since May 2021, WI-DHS has used the MHBG-APRA grant funds in a manner fully consistent with SAMHSA’s statements regarding the nature of the grant and WI-DHS’s grant application.

85. These funds have been used for County Substance Abuse Prevention, Tribal Substance Abuse supplemental funding, Community Based Withdrawal Management Centers, Harm Reduction Fentanyl Test Kits, ED2 Recovery, Peer Run Recovery Centers, Certified Peer Specialists, Prevention and media campaigns. Contracted agencies include counties, tribes and non-profit organizations.
86. As of March 24, 2025, the remaining amount of funds committed by SAMHSA is \$7,195,871.61.
87. WI-DHS met with the SAMHSA Grant Program Officer quarterly. Feedback was positive regarding how the funding was assisting local providers and communities. There were ongoing discussions about the various supplemental funding sources being used and how WI-DHS was managing the overall timelines. To accommodate spending down other grants with earlier end dates, WI-DHS planned to use much of the ARPA funding in 2025. The preference by SAMHSA was to spend more ARPA funding prior to 2025, however this was not an option with accommodating multiple grant timelines
88. On or about March 24, 2025, without any prior notice or indication, SAMHSA informed WI-DHS that effective March 24, 2025 its MHBG-APRA funding was being terminated. A true and correct copy of the March 24, 2025 grant award termination notice is attached as Exhibit Q. The March 24, 2025 termination notice cited the President's Executive Order 14222, Implementing the President's "Department of Government Efficiency" Cost Efficiency Initiative.
89. On March 28, 2025, WI-DHS staff received an email stating "The termination of this award is for cause. The block grant provisions at 42 U.S.C. §300x-55 permit termination if the state "has materially failed to comply with the agreements or other conditions required for the

receipt of a grant under the program involved.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out.” A true and correct copy of the March 28, 2025 email is attached as Exhibit R.

90. WI-DHS relied and acted upon its expectation and understanding that HHS would fulfill its commitment to provide MHBG-APRA funding it had awarded to WI-DHS.
91. The termination of funds will mean that needed mental health treatments and services will no longer be available to high-risk populations. This includes those in crisis situations and those receiving support from peers with lived experience as part of the recovery process, or those in recovery that are currently experiencing a mental health crisis/emergency.
92. Prior to the grant award termination on March 24, 2025, SAMHSA had never provided WI-DHS with notice, written or otherwise, that the grant administered by WI-DHS was in any way unsatisfactory.
93. In total, this action is expected to jeopardize over \$225 million that Wisconsin expected to receive, including investments to bolster Wisconsin's public health infrastructure, support mental health services, prevent and respond to substance abuse, and strengthen local EMS.

I declare under penalty of perjury under the laws of the United States that, to the best of my knowledge, the foregoing is true and correct.

Executed on March 28, 2025, at New Berlin, Wisconsin.

A handwritten signature in black ink, reading "Debra A. Standridge". The signature is fluid and cursive, with the first name "Debra" and last name "Standridge" clearly legible, and a middle initial "A." in between.

DEBRA STANDRIDGE

1. DATE ISSUED MM/DD/YYYY 1a. SUPERSEDES AWARD NOTICE dated #: 4789

07/18/2019

except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

2939 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
301(A)AND317(K)(2)PHS42USC241(A)247B(K)22. CFDA NO.
93.323 - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

3. ASSISTANCE TYPE Cooperative Agreement

4. GRANT NO. 1 NU50CK000534-01-00
Formerly5. TYPE OF AWARD
Other

4a. FAIN NU50CK000534

5a. ACTION TYPE New

6. PROJECT PERIOD MM/DD/YYYY
From 08/01/2019Through MM/DD/YYYY
07/31/20247. BUDGET PERIOD MM/DD/YYYY
From 08/01/2019Through MM/DD/YYYY
07/31/2020

8. TITLE OF PROJECT (OR PROGRAM)

Wisconsin's Application for the 2019 Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) Cooperative Agreement

9a. GRANTEE NAME AND ADDRESS

HEALTH SERVICES, WISCONSIN DEPARTMENT OF
1 W Wilson St
Madison, WI 53703-3445

9b. GRANTEE PROJECT DIRECTOR

Ms. Traci DeSalvo
1 W Wilson St Room 272
Communicable Disease Epidemiology Section
Madison, WI 53703-3445
Phone: (608) 267-7321

10a. GRANTEE AUTHORIZING OFFICIAL

Ms. Julie Willems Van Dijk
1 W Wilson St Rm 150
Wisconsin Department of Health Services
Madison, WI 53703-3445

10b. FEDERAL PROJECT OFFICER

Ms. Amanda Pullman
1600 Clifton Rd NE
Atlanta, GA 30329-4018
Phone: 4047185770

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)

I Financial Assistance from the Federal Awarding Agency Only

II Total project costs including grant funds and all other financial participation

I

a. Salaries and WageS	1,609,652.00
b. Fringe Benefits	629,587.00
c. Total Personnel Costs	2,239,239.00
d. Equipment	0.00
e. Supplies	15,500.00
f. Travel	37,099.00
g. Construction	0.00
h. Other	458,090.00
i. Contractual	4,242,658.00
j. TOTAL DIRECT COSTS	6,992,586.00
k. INDIRECT COSTS	109,786.00
l. TOTAL APPROVED BUDGET	7,102,372.00
m. Federal Share	7,102,372.00
n. Non-Federal Share	0.00

12. AWARD COMPUTATION

a. Amount of Federal Financial Assistance (from item 11m)	7,102,372.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	0.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	7,102,372.00
13. Total Federal Funds Awarded to Date for Project Period	7,102,372.00

14. RECOMMENDED FUTURE SUPPORT

(Subject to the availability of funds and satisfactory progress of the project):

YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a. 2		d. 5	
b. 3		e. 6	
c. 4		f. 7	

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

- a. DEDUCTION
- b. ADDITIONAL COSTS
- c. MATCHING
- d. OTHER RESEARCH (Add / Deduct Option)
- e. OTHER (See REMARKS)

b

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDOING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

- a. The grant program legislation
- b. The grant program regulations.
- c. This award notice including terms and conditions, if any, noted below under REMARKS.
- d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached -

☒ Yes☐ No

GRANTS MANAGEMENT OFFICIAL:

Shirley K Byrd, Grants Management Officer
2939 Flowers Rd
Mailstop TV-2
Atlanta, GA 30341-5509
Phone: (770) 488-2591

17.OBJ CLASS	41.51	18a. VENDOR CODE	1396006469A1	18b. EIN	396006469	19. DUNS	036448835	20. CONG. DIST.	02
FY-ACCOUNT NO.		DOCUMENT NO.		ADMINISTRATIVE CODE		AMT ACTION FIN ASST		APPROPRIATION	
21. a.	9-939ZUGW	b.	19NU50CK000534	c.	CK	d.	\$20,000.00	e.	75-19-0947
22. a.	9-939ZSHM	b.	19NU50CK000534	c.	CK	d.	\$61,186.00	e.	75-19-0949
23. a.	9-939ZSKR	b.	19NU50CK000534	c.	CK	d.	\$414,979.00	e.	75-19-0949

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3	DATE ISSUED 07/18/2019
GRANT NO. 1 NU50CK000534-01-00	

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
24.a. 9-939ZVJC	b. 19NU50CK000534	c. CK	d. \$681,116.00	e. 75-19-0949
25.a. 9-93909UW	b. 19NU50CK000534	c. CK	d. \$1,142,126.00	e. 75-X-0949
26.a. 9-9390CED	b. 19NU50CK000534	c. CK	d. \$57,692.00	e. 75-19-0943
27.a. 9-939ZSCE	b. 19NU50CK000534	c. CK	d. \$214,365.00	e. 75-19-0951
28.a. 9-93909PE	b. 19NU50CK000534	c. CK	d. \$12,179.00	e. 75-X-0951
29.a. 9-93909PG	b. 19NU50CK000534	c. CK	d. \$27,424.00	e. 75-X-0951
30.a. 9-93909QZ	b. 19NU50CK000534	c. CK	d. \$130,106.00	e. 75-X-0951
31.a. 9-921VV47	b. 19NU50CK000534	c. CK	d. \$211,629.00	e. 75-19-0949
32.a. 9-939014P	b. 19NU50CK000534	c. CK	d. \$282,427.00	e. 75-19-0949
33.a. 9-93903GE	b. 19NU50CK000534	c. CK	d. \$187,898.00	e. 75-19-0949
34.a. 9-93905VH	b. 19NU50CK000534	c. CK	d. \$302,739.00	e. 75-19-0949
35.a. 9-93906N9	b. 19NU50CK000534	c. CK	d. \$571,366.00	e. 75-19-0949
36.a. 9-93908MV	b. 19NU50CK000534	c. CK	d. \$2,785,140.00	e. 75-19-0949

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

NOTICE OF AWARD (Continuation Sheet)

PAGE 3 of 3	DATE ISSUED 07/18/2019
GRANT NO. 1 NU50CK000534-01-00	

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
08/01/2019	07/31/2020	Annual	10/29/2020
08/01/2020	07/31/2021	Annual	10/29/2021
08/01/2021	07/31/2022	Annual	10/29/2022
08/01/2022	07/31/2023	Annual	10/29/2023
08/01/2023	07/31/2024	Annual	10/29/2024

AWARD ATTACHMENTS

Wisconsin Department of Health Services

1 NU50CK000534-01-00

1. Terms and Conditions

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-CK19-1904, entitled 2019 Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) - 2019, and application dated May 10, 2019, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of \$7,102,372 is approved for the Year 01 budget period, which is August 1, 2019 through July 31, 2020. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

NOFO Funding	Amount
Non-PPHF	\$ 7,102,372

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO.

Objective/Technical Review Statement Response Requirement: The review comments on the strengths and weaknesses of the proposal are provided as part of this award. A response to the weaknesses in these statements must be submitted to and approved, in writing, by the Program Officer noted in the CDC Staff Contacts section of this NoA, no later than 30 days from the budget period start date. Failure to submit the required information by the due date, September 2, 2019, will cause delay in programmatic progress and will adversely affect the future funding of this project.

Budget Revision Requirement: By September 2, 2019 the recipient must submit a revised budget with a narrative justification. Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

Expanded Authority: The recipient is permitted the following expanded authority in the administration of the award.

- ☒ Carryover of unobligated balances from one budget period to a subsequent budget period. Unobligated funds may be used for purposes within the scope of the project as originally approved. Recipients will report use, or intended use, of unobligated funds in Section 12 "Remarks" of the annual Federal Financial Report. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the recipient's authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset CDC funding for a subsequent budget period, or use a combination of these actions.

Program Income: Any program income generated under this grant or cooperative agreement will be used in accordance with the Addition alternative.

Addition alternative: Under this alternative, program income is added to the funds committed to the project/program and is used to further eligible project/program objectives.

Note: The disposition of program income must have written prior approval from the GMO.

FUNDING RESTRICTIONS AND LIMITATIONS

Indirect Costs: Indirect costs are approved based on the negotiated indirect cost rate agreement dated January 4, 2019, which calculates indirect costs as follows, a Provisional rate is approved at a rate of 7.21% of the base, which includes, direct salaries and wages including vacation, holiday, sick pay and other paid absences but excluding all other fringe benefits. The effective dates of this indirect cost rate are from July 01, 2018 until June 30, 2021.

REPORTING REQUIREMENTS

Performance Progress and Monitoring: Performance information collection initiated under this grant/cooperative agreement has been approved by the Office of Management and Budget under **OMB Number 0920-1132, "Performance Progress and Monitoring Report", Expiration Date 8/31/2019.** The components of the PPMR are available for download at: <https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html> .

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
Karen Zion, Grants Management Specialist
Centers for Disease Control and Prevention
Infectious Disease Services Branch
2939 Flowers Road, MS-TV-2
Atlanta, GA 30341
Telephone: 770-488-2729
Email: wvf8@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

Component: Non-PPHF

Document Number: 19NU50CK000534

CDC Staff Contacts

Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of

recipients for business and administrative matters pertinent to grant awards.

GMS Contact:

Karen Zion, Grants Management Specialist
Centers for Disease Control and Prevention
Infectious Disease Services Branch
2939 Flowers Road, MS-TV-2
Atlanta, GA 30341
Telephone: 770-488-2729
Email: wvf8@cdc.gov

Program/Project Officer: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

1. DATE ISSUED MM/DD/YYYY 05/18/2020 1a. SUPERSEDES AWARD NOTICE dated 04/23/2022 #: 4797

except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention2939 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
301(A)AND317(K)(2)PHS42USC241(A)247B(K)22. CFDA NO.
93.323 - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

3. ASSISTANCE TYPE Cooperative Agreement

4. GRANT NO. 6 NU50CK000534-01-08
Formerly5. TYPE OF AWARD
Demonstration

4a. FAIN NU50CK000534

5a. ACTION TYPE Post Award Amendment

6. PROJECT PERIOD MM/DD/YYYY
From 08/01/2019Through MM/DD/YYYY
07/31/20247. BUDGET PERIOD MM/DD/YYYY
From 08/01/2019Through MM/DD/YYYY
07/31/2020

8. TITLE OF PROJECT (OR PROGRAM)

Wisconsin's Application for the 2019 Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) Cooperative Agreement

9a. GRANTEE NAME AND ADDRESS

HEALTH SERVICES, WISCONSIN DEPARTMENT OF
1 W Wilson St
Madison, WI 53703-3445

9b. GRANTEE PROJECT DIRECTOR

Ms. Traci DeSalvo
1 W Wilson St Room 272
Communicable Disease Epidemiology Section
Madison, WI 53703-3445
Phone: (608) 267-7321

10a. GRANTEE AUTHORIZING OFFICIAL

Ms. Julie Willems Van Dijk
1 W Wilson St Rm 150
Wisconsin Department of Health Services
Madison, WI 53703-3445

10b. FEDERAL PROJECT OFFICER

Ms. Amanda Pullman
1600 Clifton Rd NE
Atlanta, GA 30329-4018
Phone: 4047185770

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)

I Financial Assistance from the Federal Awarding Agency Only

II Total project costs including grant funds and all other financial participation

I

a. Salaries and WageS	1,766,693.00
b. Fringe Benefits	663,500.00
c. Total Personnel Costs	2,430,193.00
d. Equipment	0.00
e. Supplies	163,262.00
f. Travel	65,123.00
g. Construction	0.00
h. Other	148,901,504.00
i. Contractual	4,606,557.00
j. TOTAL DIRECT COSTS	156,166,639.00
k. INDIRECT COSTS	127,378.00
l. TOTAL APPROVED BUDGET	156,294,017.00
m. Federal Share	156,294,017.00
n. Non-Federal Share	0.00

12. AWARD COMPUTATION

a. Amount of Federal Financial Assistance (from item 11m)	156,294,017.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	19,216,083.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	137,077,934.00

13. Total Federal Funds Awarded to Date for Project Period 156,294,017.00

14. RECOMMENDED FUTURE SUPPORT

(Subject to the availability of funds and satisfactory progress of the project):

YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a. 2		d. 5	
b. 3		e. 6	
c. 4		f. 7	

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

- a. DEDUCTION
- b. ADDITIONAL COSTS
- c. MATCHING
- d. OTHER RESEARCH (Add / Deduct Option)
- e. OTHER (See REMARKS)

b

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDOING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

- a. The grant program legislation
- b. The grant program regulations.
- c. This award notice including terms and conditions, if any, noted below under REMARKS.
- d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached -

☒ Yes☐ No

ELC Enhancing Detection Funding: Financial Assistance in the amount \$137,077,934

GRANTS MANAGEMENT OFFICIAL:

Brownie Anderson-Rana, Grants Management Officer
2939 Flowers Road
Mailstop TV2
Atlanta, GA 30341-5509
Phone: 770-488-2771

17.OBJ CLASS 41.51	18a. VENDOR CODE 1396006469A1	18b. EIN 396006469	19. DUNS 036448835	20. CONG. DIST. 02
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 0-9390F7F	b. 19NU50CK000534C4	c. CK	d. \$137,077,934.00	e. 75-X-0140
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3	DATE ISSUED 05/18/2020
GRANT NO. 6 NU50CK000534-01-08	

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

NOTICE OF AWARD (Continuation Sheet)

PAGE 3 of 3	DATE ISSUED 05/18/2020
GRANT NO. 6 NU50CK000534-01-08	

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
08/01/2019	07/31/2020	Annual	10/29/2020

AWARD ATTACHMENTS

Wisconsin Department of Health

6 NU50CK000534-01-08

1. Terms and Conditions

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CK19-1904, entitled Epidemiology and Laboratory Capacity (ELC), which is hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Component Funding: Additional funding in the amount \$137,077,934 is approved for the Year 01 budget period, which is August 1, 2019 through July 31, 2020

COVID-19 Paycheck Protection Program and Health Care Enhancement Act Response Activities:

E. Cross-Cutting Emerging Issues: \$137,077,934

Recipients have **30 months** from the date of this NoA to expend all funds awarded herein

Budget/Workplan Revision Requirement: Within 30 days of this NoA, the recipient must submit a revised budget with a narrative justification outlining response activities. Failure to submit the required information in a timely manner may adversely affect the future funding of the project. If the information cannot be provided by the due date, you are required to contact your ELC Project Officer and Grant Management Specialist. The revised budget must be uploaded in GrantSolutions as an amendment to allow issuance of a revised NoA.

Pre-Award Costs: Pre-award costs dating back to January 20, 2020 – when CDC first activated its Emergency Operations Center (EOC) – and directly related to the COVID-19 outbreak response are allowable.

Indirect Costs: Indirect cost will be approved based on current approved negotiated indirect cost rate agreement.

Overtime: Because overtime costs are a very likely and reasonable expense during the response to COVID-19, CDC will allow recipients to include projected overtime in their budgets. Recipients should be careful to estimate costs based on current real-time needs and will still be required to follow federal rules and regulations in accounting for the employees' time and effort.

Additional Term and Condition:

A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); and/or the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139) agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.

In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC.

Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the

purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.

This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

Unallowable Costs:

- Research
- Clinical care
- Publicity and propaganda (lobbying):
 - Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
 - the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body
 - See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients:
https://www.cdc.gov/grants/documents/Anti-Lobbying_Restrictions_for_CDC_Grantees_July_2012.pdf
- ***All unallowable costs cited in CDC-RFA-CK19-1904 remain in effect, unless specifically amended in this guidance, in accordance with 45 CFR Part 75 – Uniform Administrative Requirements, Cost Principles, And Audit Requirements for HHS Awards.***

REPORTING REQUIREMENTS

Additional Reporting:

- Monthly fiscal reports (beginning 60 days after NOAs are issued)
- Quarterly progress reports on status of timelines, goals, and objectives as defined by CDC in approved work plans
- Quarterly Performance measure data
- CDC may require recipients to develop annual progress reports (APRs). CDC will provide APR guidance and optional templates should they be required.
- Quarterly reporting of test results, both positive and negative
- Clarity on how the states will focus on high socially vulnerable index counties, rural and urban areas, etc. (Vulnerable populations must be specific).

Required Disclosures for Federal Awardee Performance and Integrity Information System

(FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the

following addresses:

CDC, Office of Grants Services
Tonya M. Jenkins, Grants Management Specialist
Time Solutions LLC
Office of Grants Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
pjo6@cdc.gov | 404-498-2399 office

AND

U.S. Department of Health and Human Services Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator 330 Independence Avenue, SW
Cohen Building, Room 5527 Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or Email:
MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1- 800-HHS- TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

Stewardship: The recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to your cooperative agreement are allowable, allocable, and reasonable and that they address the highest priority needs as they relate to this program.

All the other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU50CK000534-02-05

FAIN# NU50CK000534

Federal Award Date: 01/14/2021

Recipient Information**1. Recipient Name**

Wisconsin Department of Health Services
1 W Wilson St
Madison, WI 53703-3445
[NO DATA]

2. Congressional District of Recipient
02**3. Payment System Identifier (ID)**

1396006469A1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier**7. Project Director or Principal Investigator**

Ms. Traci DeSalvo
Communicable Diseases Epidemiology Section Chief
traci.desalvo@wi.gov
(608) 267-7321

8. Authorized Official

Ms. Julie Willems Van Dijk
Deputy Secretary
DHSgrantreview@dhs.wisconsin.gov
608.266.8399

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Ms. Joelle Cadet
Grants Management Specialist
qrx2@cdc.gov
(404) 498-4349

10. Program Official Contact Information

Ms. Amanda Pullman
Public Health Analyst
nkm8@cdc.gov
4047185770

Federal Award Information**11. Award Number**

6 NU50CK000534-02-05

12. Unique Federal Award Identification Number (FAIN)

NU50CK000534

13. Statutory Authority

301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

14. Federal Award Project Title

Wisconsin's Application for the 2019 Epidemiology and Laboratory Capacity for Prevention and Control of
Emerging Infectious Diseases (ELC) Cooperative Agreement

15. Assistance Listing Number

93.323

16. Assistance Listing Program Title

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

17. Award Action Type

Supplement

18. Is the Award R&D?

No

Summary Federal Award Financial Information**19. Budget Period Start Date** 08/01/2020 - **End Date** 07/31/2021**20. Total Amount of Federal Funds Obligated by this Action** \$335,129,886.00

20a. Direct Cost Amount \$335,129,886.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$0.00**22. Offset** \$0.00**23. Total Amount of Federal Funds Obligated this budget period** \$9,656,458.00**24. Total Approved Cost Sharing or Matching, where applicable** \$0.00**25. Total Federal and Non-Federal Approved this Budget Period** \$344,786,344.00**26. Project Period Start Date** 08/01/2019 - **End Date** 07/31/2024**27. Total Amount of the Federal Award including Approved
Cost Sharing or Matching this Project Period** \$502,571,385.00**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Kathy Raible

30. Remarks



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU50CK000534-02-05

FAIN# NU50CK000534

Federal Award Date: 01/14/2021

Recipient Information**Recipient Name**

Wisconsin Department of Health Services
1 W Wilson St
Madison, WI 53703-3445
[NO DATA]

Congressional District of Recipient

02

Payment Account Number and Type

1396006469A1

Employer Identification Number (EIN) Data

396006469

Universal Numbering System (DUNS)

036448835

Recipient's Unique Entity Identifier

Not Available

31. Assistance Type

Cooperative Agreement

32. Type of Award

Demonstration

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$1,772,465.00
b. Fringe Benefits	\$696,475.00
c. Total Personnel Costs	\$2,468,940.00
d. Equipment	\$0.00
e. Supplies	\$125.00
f. Travel	\$23,916.00
g. Construction	\$0.00
h. Other	\$337,153,152.00
i. Contractual	\$5,013,224.00
j. TOTAL DIRECT COSTS	\$344,659,357.00
k. INDIRECT COSTS	\$126,987.00
l. TOTAL APPROVED BUDGET	\$344,786,344.00
m. Federal Share	\$344,786,344.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390GCP	19NU50CK000534AMDC4	CK	41.51	\$0.00	75-X-0943
1-9390GCQ	19NU50CK000534THC4	CK	41.51	\$0.00	75-X-0943
1-9390GF0	19NU50CK000534PHLC4	CK	41.51	\$0.00	75-X-0943
1-9390GKT	19NU50CK000534EDEXC5	CK	41.51	\$335,129,886.00	75-2122-0140



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU50CK000534-02-05

FAIN# NU50CK000534

Federal Award Date: 01/14/2021

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

Wisconsin Department of Health Services

6 NU50CK000534-02-05

1. Terms & Conditions /ELC Enhancing Detention Exp

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CK19-1904, entitled Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC), which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Supplemental Component Funding: Additional funding in the amount \$ 335,129,886 is approved for the Year 02 budget period, which is August 1, 2020 through July 31, 2021.

The approved component and funding level for this notice of award are:

NOFO Component	Amount
ELC Enhancing Detection Expansion	\$335,129,886

Recipients have until July 31, 2023 to expend all COVID-19 funds awarded herein.

Overtime: Because overtime costs are a very likely and reasonable expense during the response to COVID-19, CDC will allow recipients to include projected overtime in their budgets. Recipients should be careful to estimate costs based on current real-time needs and will still be required to follow federal rules and regulations in accounting for the employees' time and effort.

Coronavirus Disease 2019 (COVID-19) Funds: A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); and/or the Consolidated Appropriations Act, 2021, Division M – Coronavirus Response and Relief Supplemental Appropriations Act, 2021 (P.L. 116-260), agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.

To achieve the public health objectives of ensuring the health, safety, and welfare of all Americans, Recipient must distribute or administer vaccine without discriminating on non-public-health grounds within a prioritized group. This includes, but is not limited to, immigration status, criminal history, incarceration, or homelessness. To this end, and to help achieve the public health imperative of widespread herd immunity to COVID-19, Recipient must administer or distribute vaccine to any and all individuals within a prioritized group in the same timeframe, taking into account available vaccine doses. For example, if meatpacking plant workers are a prioritized group, then all workers in that group, including undocumented immigrants, must be vaccinated to help assure that the plant is in a position to safely resume essential functions.

In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC. HHS laboratory reporting [guidance](https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf) is posted at: <https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf>.

Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.

This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

Unallowable Costs:

- Research
- Clinical care
- Publicity and propaganda (lobbying):
 - Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
 - the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body
 - See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients: https://www.cdc.gov/grants/documents/Anti-Lobbying_Restrictions_for_CDC_Grantees_July_2012.pdf

- All unallowable costs cited in CDC-RFA-CK19-1904 remain in effect, unless specifically amended in this guidance, in accordance with 45 CFR Part 75 – Uniform Administrative Requirements, Cost Principles, And Audit Requirements for HHS Awards.

Budget Revision Requirement: By March 17, 2021 the recipient must submit a separate revised budget with a narrative justification and workplan in accordance with the COVID-19 guidance. The workplan should be submitted in REDCap and must address all activities in the guidance.

The revised budget and narrative justification must be uploaded as an amendment in Grant Solutions with a SF424A.

Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

REPORTING REQUIREMENTS

COVID-19 - Additional Reporting Requirements:

- Monthly fiscal reports (beginning 60 days after NOAs are issued). Thereafter, all monthly financial reporting will occur on the 5th of the month which will cover the preceding month's expenditures and unliquidated obligations (ULOs).
- Quarterly workplan milestone progress reporting will start on April 30, 2021; and will follow the regular ELC quarterly reporting timeline.
- The Jurisdictional Testing, Case Investigation, and Contact Tracing Plan updates will occur on the same quarterly reporting timeline as the workplan milestone progress.
- CDC may require recipients to develop annual progress reports (APRs). CDC will provide APR guidance and optional templates should they be required

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
Joëlle Cadet, Grants Management Specialist

Centers for Disease Control and
Prevention Branch 1
2939 Flowers Road, MS-TV2
Atlanta, GA 30341
Email: qrx2@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosure, Intake Coordinator
330 Independent Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201
Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject
line) or Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1- 800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the

NOFO and the approved application.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

Stewardship Information

Stewardship: The recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to your cooperative agreement are allowable, allocable, and reasonable and that they address the highest priority needs as they relate to this program.

All the other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

General Terms and Conditions for Non-Research Grants and Cooperative Agreements

Incorporation: The U.S. Department of Health and Human Services (HHS) grant recipients must comply with: all terms and conditions outlined in the Notice of Funding Opportunity (NOFO); their Notice of Award (NOA); grants policy contained in applicable HHS Grants Policy Statements; HHS grant administration regulations (e.g., 45 CFR Part 75, 2 CFR 200 (as applicable)); requirements imposed by program statutes and regulations; applicable Executive Orders; HHS Administrative and National Policy Requirements; HHS policies, directives, and guidance; and requirements or limitations in any applicable appropriations acts. The term grant is used throughout these general terms and conditions of award and includes cooperative agreements.

Note: In the event that any requirement in the NOA, the NOFO, the HHS Grants Policy Statement, 45 CFR Part 75, or applicable statutes/appropriations acts conflict, then statutes and regulations take precedence.

Applicability of 2 CFR 200 Provisions Beginning October 1, 2024

This award is subject to the requirements in 45 CFR Part 75, except as amended by the following provisions of 2 CFR Part 200, which apply to new, continuation, and supplemental awards made on or after October 1, 2024.

- 2 CFR § 200.1. Definitions, "*Modified Total Direct Cost*", "*Equipment*", and "*Supplies*"
- 2 CFR § 200.313(e). Equipment, *Disposition*
- 2 CFR § 200.314(a). Supplies
- 2 CFR § 200.320. Procurement methods
- 2 CFR § 200.333. Fixed amount subawards
- 2 CFR § 200.344. Closeout
- 2 CFR § 200.414(f). Indirect costs, *De Minimis Rate*
- 2 CFR § 200.501. Audit requirements

2 CFR 200 citation	Replaces 45 CFR 75 citation
2 CFR § 200.1. Definitions, <i>"Modified Total Direct Cost"</i>	45 CFR § 75.2. Definitions, <i>"Modified Total Direct Cost"</i>
2 CFR § 200.1. Definitions, <i>"Equipment"</i>	45 CFR § 75.2. Definitions, <i>"Equipment"</i>
2 CFR § 200.1. Definitions, <i>"Supplies"</i>	45 CFR § 75.2. Definitions, <i>"Supplies"</i>
2 CFR § 200.313(e). Equipment, <i>Disposition</i>	45 CFR § 75.320(e). Equipment, <i>Disposition</i>
2 CFR § 200.314(a). Supplies	45 CFR § 75.321(a). Supplies
2 CFR § 200.320. Procurement methods	45 CFR § 75.329. Procurement procedures
2 CFR § 200.333. Fixed amount subawards	45 CFR § 75.353. Fixed amount subawards
2 CFR § 200.344. Closeout	45 CFR § 75.381. Closeout
2 CFR § 200.414(f). Indirect costs, <i>De Minimis Rate</i>	45 CFR § 75.414(f). Indirect (F&A) costs, <i>De Minimis Rate</i>
2 CFR § 200.501. Audit requirements	45 CFR § 75.501. Audit requirements

FEDERAL REGULATIONS AND POLICIES

2 CFR 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. Referenced where indicated and applicable.

<https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200?toc=1>

45 CFR Part 75 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards. <https://www.ecfr.gov/cgi-bin/text-idx?node=pt45.1.75&rqn=div5>

HHS Administrative and National Policy Requirements

<https://www.hhs.gov/sites/default/files/hhs-administrative-national-policy-requirements.pdf>

HHS Grants Policy and Regulations

<https://www.hhs.gov/grants/grants/grants-policies-regulations/index.html>

HHS Grants Policy Statement (effective for new, continuation, and supplemental awards made on or after October 1, 2024)

<https://www.hhs.gov/sites/default/files/hhs-grants-policy-statement-october-2024.pdf>

HHS Grants Policy Statement (January 2007 version applies to awards issued before October 1, 2024)

<https://public3.pagefreezer.com/browse/HHS.gov/27-09-2024T06:59/https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>

Federal Funding Accountability and Transparency Act (FFATA). <https://sam.gov/fsrs>.

Refer to the section below on Reporting Requirements for more details.

Trafficking In Persons: Consistent with 2 CFR 175, awards are subject to the requirements of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. Part 7104(g)).

<https://www.ecfr.gov/current/title-2/subtitle-A/chapter-I/part-175>

FUNDING RESTRICTIONS AND LIMITATIONS

Cost Limitations as stated in Appropriations Acts. Recipients must follow applicable fiscal year appropriations law in effect at the time of award and consistent with the specific funds provided under that award. The general provisions for grants, cooperative agreements and loans funded by the Departments of Labor, Health and Human Services, Education, and Related Agencies Appropriations Act is available

at: <https://www.congress.gov/resources/display/content/Appropriations+and+Budget>.

Though Recipients are required to comply with all applicable appropriations restrictions, please find below specific ones of note. CDC notes that the cited section for each below provision may change annually.

- A. Cap on Salaries (Division H, Title II, General Provisions, Sec. 202): None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II.

Note: The salary rate limitation does not restrict the salary that an organization may pay an individual working under an HHS award or order; it merely limits the portion of that salary that may be paid with federal funds. The HHS Grants Policy Statement further explains the application of this salary rate limitation.

- B. Gun Control Prohibition (Div. H, Title II, Sec. 210): None of the funds made available in this title may be used, in whole or in part, to advocate or promote gun control.

- C. Lobbying Restrictions (Div. H, Title V, Sec. 503):

- 503(a): No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used, other than for normal and recognized executive- legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government itself.
- 503(b): No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.

- 503(c): The prohibitions in subsections (a) and (b) shall include any activity to advocate or promote any proposed, pending or future federal, state or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

For additional information, see Anti-Lobbying Restrictions for CDC Grantees at <https://www.cdc.gov/grants/documents/Anti-Lobbying-Restrictions.pdf>.

- D. Blocking access to pornography (Div. H, Title V, Sec. 520): (a) None of the funds made available in this Act may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography; (b) Nothing in subsection (a) shall limit the use of funds necessary for any federal, state, tribal, or local law enforcement agency or any other entity carrying out criminal investigations, prosecution, or adjudication activities.
- E. Needle Exchange (Div. H, Title V, Sec. 526): Notwithstanding any other provision of this Act, no funds appropriated in this Act shall be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

Prohibition on certain telecommunications and video surveillance services or equipment ([2 CFR 200.216](#)): For all new, non-competing continuation, renewal or supplemental awards issued on or after August 13, 2020, recipients and subrecipients are prohibited from obligating or expending grant funds (to include direct and indirect expenditures as well as cost share and program funds) to:

1. Procure or obtain,
2. Extend or renew a contract to procure or obtain; or
3. Enter into contract (or extend or renew contract) to procure or obtain equipment, services, or systems that use covered telecommunications equipment or services as a substantial or essential component of any system, or as critical technology as part of any system. As described in [2 CFR 200.216](#), covered telecommunications equipment is telecommunications equipment produced by Huawei Technologies Company or ZTE Corporation (or any subsidiary or affiliate of such entities).
 - i. For the purpose of public safety, security of government facilities, physical security surveillance of critical infrastructure, and other national security purposes, video surveillance and telecommunications equipment produced by Hytera Communications Corporation, Hangzhou Hikvision Digital Technology Company, or Dahua Technology Company (or any subsidiary or affiliate of such entities).
 - ii. Telecommunications or video surveillance services provided by such entities or using such equipment.
 - iii. Telecommunications or video surveillance equipment or services produced or provided by an entity that the Secretary of Defense, in consultation with the Director of the National Intelligence or the Director of the Federal Bureau of Investigation, reasonably believes to be an entity owned or controlled by, or otherwise, connected to the government of a covered foreign country.

President's Emergency Plan for AIDS Relief (PEPFAR) funding is exempt from the prohibition under [2 CFR 200.216](#) until September 30, 2028. During the exemption period, PEPFAR recipients are expected to work toward implementation of [2 CFR 200.216](#). The exemption may only be applied when there is no available alternative eligible source for these services.

Cancel Year: 31 U.S.C. Part 1552(a) Procedure for Appropriation Accounts Available for Definite Periods states the following: On September 30th of the 5th fiscal year after the period of availability for obligation of a fixed appropriation account ends, the account shall be closed and any remaining balances (whether obligated or unobligated) in the account shall be canceled and thereafter shall not be available for obligation or expenditure for any purpose.

REPORTING REQUIREMENTS

Annual Federal Financial Report (FFR, SF-425): The Annual Federal Financial Report (FFR) SF-425 is required and must be submitted no later than 90 days after the end of the budget period in the Payment Management System.

Additional guidance on submission of Federal Financial Reports can be found at <https://www.cdc.gov/grants/documents/change-in-federal-reporting-fy-2021-recipients.pdf>.

If more frequent reporting is required, the Notice of Award terms and conditions will explicitly state the reporting requirement.

Annual Performance Progress and Monitoring Reporting: The Annual Performance Progress and Monitoring Report (PPMR) is due no later than 120 days prior to the end of the budget period and serves as the continuation application for the follow-on budget period. Submission instructions, due date, and format will be included in the guidance from the assigned GMO/GMS via www.grantsolutions.gov.

Any change to the existing information collection noted in the award terms and conditions will be subject to review and approval by the Office of Management and Budget (OMB) under the Paperwork Reduction Act.

Data Collection and Sharing Under Award: Consistent with strategies and activities expected and anticipated under this award, Recipient, either directly or indirectly, may be expected to collect or generate data for public health purposes. For purposes of this award, data for public health purposes may be administrative data or data commonly accepted in the scientific community as a basis for public health findings, conclusions, and implementation, but does not include preliminary analyses, drafts of scientific papers, plans for future research communications with colleagues, or physical objects, such as laboratory notebooks or laboratory specimens unless otherwise specified in the award.

45 C.F.R. 75.322(d) states that the federal government has the right to: 1) obtain, reproduce, publish, or otherwise use the data produced under a [federal award](#); and 2) authorize others to receive, reproduce, publish, or otherwise use such data for federal purposes. In furtherance of various United States Government-wide initiatives and policies, the federal government seeks to make federally funded publications and data underlying them more readily available, and to make public health data more readily accessible within the federal government and to the public.

Consistent with grant regulations, CDC may legally obtain a copy of any data collected or generated under this award. Where CDC has determined that data collected or generated under this award must be shared with CDC, such direction will be further addressed in your Notice of Funding Opportunity, your Notice of Grant Award, or other specific grant guidance. Acceptance of funds under this award is an acknowledgement of this regulatory provision and its application to this award.

Data Management Plan: CDC requires recipients for projects that involve the collection or generation of data with federal funds to develop, submit, and comply with a Data Management Plan (DMP) for each collection or generation of public health data undertaken as part of the award. The DMP should take into consideration sharing data with CDC including: 1) the specific data that will be shared under the award, 2) the process and timing planned for such sharing, 3) and any legal limitations that the Recipient asserts would hinder CDC access to, or use of, the data collected or generated under the award. In addition, the DMP should address broader access to and archiving/long-term preservation of collected or generated data. Additional information on the Data Management and Access requirements can be found at <https://www.cdc.gov/grants/additional-requirements/ar-25.html>.

Audit Requirement Domestic Organizations (*including US-based organizations implementing projects with foreign components*): An organization that expends \$1,000,000 or more in a fiscal year in federal awards shall have a single or program-specific audit conducted for that year in accordance with the provisions of 2 CFR 200.501. The audit period is an organization's fiscal year. The audit must be completed along with a data collection form (SF-SAC), and the reporting package shall be submitted within the earlier of 30 days after receipt of the auditor's report(s), or nine (9) months after the end of the audit period. The audit report must be sent to:

Federal Audit Clearing House Internet Data Entry System Electronic Submission:
[https://harvester.census.gov/facides/\(S\(0vkw1zaelyzjibnahocga5i0\)\)/account/login.aspx](https://harvester.census.gov/facides/(S(0vkw1zaelyzjibnahocga5i0))/account/login.aspx)

AND

Office of Financial Resources, Office of Risk Management and Internal Controls, Audit Resolution Team (ART), ORMIC.Audit.Resolution@cdc.gov.

Audit Requirement Foreign Organizations: A foreign organization that expends \$300,000 or more in a fiscal year on its federal awards must have a single or program-specific audit conducted for that year. The audit period is an organization's fiscal year. The auditor shall be a U.S.-based Certified Public Accountant firm, the foreign government's Supreme Audit Institution or equivalent, or an audit firm endorsed by the U.S. Agency for International Development's Office of Inspector General. The audit must be completed in English and in US dollars and submitted within the earlier of 30 days after receipt of the auditor's report(s), or nine (9) months after the end of the audit period. The audit report must be sent to the Office of Financial Resources, Office of Risk Management and Internal Controls, Audit Resolution Team (ART) at ORMIC.Audit.Resolution@cdc.gov. After receipt of the audit report, CDC will resolve findings by issuing Final Management Determination Letters.

Domestic and Foreign organizations: Audit requirements for Subrecipients to whom 45 CFR 75 Subpart F applies: The recipient must ensure that the subrecipients receiving CDC funds also meet

these requirements. The recipient must also ensure to take appropriate corrective action within six months after receipt of the subrecipient audit report in instances of non-compliance with applicable federal law and regulations (45 CFR 75 Subpart F and HHS Grants Policy Statement). The recipient may consider whether subrecipient audits necessitate adjustment of the recipient's own accounting records. If a subrecipient is not required to have a program-specific audit, the recipient is still required to perform adequate monitoring of subrecipient activities. The recipient shall require each subrecipient to permit the independent auditor access to the subrecipient's records and financial statements. The recipient must include this requirement in all subrecipient contracts.

Federal Funding Accountability and Transparency Act (FFATA)

In accordance with 2 CFR Chapter 1, Part 170 Reporting Sub-Award and Executive Compensation Information, Prime Recipients awarded a federal grant are required to file a FFATA sub-award report by the end of the month following the month in which the prime recipient awards any sub-grant equal to or greater than \$30,000. Refer to 2 CFR Chapter 1, Part 170 Reporting Sub-Award and Executive Compensation Information at [eCFR :: 2 CFR Part 170 -- Reporting Subaward and Executive Compensation Information](#) and <https://sam.gov/fsrs> for reporting requirements and guidance.

Unique Entity Identifier (UEI)

The UEI is the official identifier for doing business with the U.S. Government as of April 4, 2022. The UEI is generated and assigned by the System for Award Management at SAM.gov. In accordance with [2 CFR part 25, Appendix A](#), a recipient must maintain current information in SAM.gov, through at least annual review, until it submits the final required financial report or receives the final payment, whichever is later.

Required Disclosures for Responsibility and Qualification (R/Q) (SAM.gov): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the assigned GMS/GMO identified in the NOA, and to the HHS OIG by email at grantdisclosures@oig.hhs.gov or by mail to the following address:

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance include suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated Responsibilities and Qualifications (R/Q) accessible through SAM (45 CFR 75.372(b)). CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award (45 CFR 75.373(b)).

1. General Reporting Requirement

If the total value of currently active grants, cooperative agreements, and procurement contracts from all federal awarding agencies exceeds \$10,000,000 for any period of time during the period of performance of this federal award, the recipient must maintain the currency of information reported to the System for Award Management (SAM) and made available in the designated integrity and performance system (currently the Responsibility/Qualification (R/Q) through SAM.gov) about civil, criminal, or administrative proceedings described in section 2 of this award term and condition. This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for federal procurement contracts, will be publicly available.

2. Proceedings About Which You Must Report

Submit the information required about each proceeding that:

- a. Is in connection with the award or performance of a grant, cooperative agreement, or procurement contract from the federal government;
- b. Reached its final disposition during the most recent five-year period; and
- c. If one of the following:
 - (1) A criminal proceeding that resulted in a conviction, as defined in paragraph 5 of this award term and condition;
 - (2) A civil proceeding that resulted in a finding of fault and liability and payment of a monetary fine, penalty, reimbursement, restitution, or damages of \$5,000 or more;
 - (3) An administrative proceeding, as defined in paragraph 5 of this award term and condition, that resulted in a finding of fault and liability and your payment of either a monetary fine or penalty of \$5,000 or more or reimbursement, restitution, or damages in excess of \$100,000; or
 - (4) Any other criminal, civil, or administrative proceeding if:
 - (i) It could have led to an outcome described in paragraph 2.c.(1), (2), or (3) of this award term and condition;
 - (ii) It had a different disposition arrived at by consent or compromise with an acknowledgement of fault on your part; and
 - (iii) The requirement in this award term and condition to disclose information about the proceeding does not conflict with applicable laws and regulations.

3. Reporting Procedures

Enter in the SAM Entity Management area the information that SAM requires about each proceeding described in section 2 of this award term and condition. You do not need to submit the information a second time under assistance awards that you received if you already provided the information through SAM because you were required to do so under federal procurement contracts that you were awarded.

4. Reporting Frequency

During any period of time when you are subject to this requirement in section 1 of this award term and condition, you must report proceedings information through SAM for the most recent five-year period, either to report new information about any proceeding(s) that you have not reported previously or affirm that there is no new information to report. Recipients that have federal contract, grant, and cooperative agreement awards with a cumulative total value greater than \$10,000,000 must disclose semiannually any information about the criminal, civil, and administrative proceedings.

5. Definitions

For purposes of this award term and condition:

- a. Administrative proceeding means a non-judicial process that is adjudicatory in nature in order to make a determination of fault or liability (e.g., Securities and Exchange Commission Administrative proceedings, Civilian Board of Contract Appeals proceedings, and Armed Services Board of Contract Appeals proceedings). This includes proceedings at the federal and state level but only in connection with performance of a federal contract or grant. It does not include audits, site visits, corrective plans, or inspection of deliverables.
- b. Conviction, for purposes of this award term and condition, means a judgment or conviction of a criminal offense by any court of competent jurisdiction, whether entered upon a verdict or a plea, and includes a conviction entered upon a plea of nolo contendere.
- c. Total value of currently active grants, cooperative agreements, and procurement contracts includes—
 - (1) Only the federal share of the funding under any federal award with a recipient cost share or match;
 - (2) The value of all expected funding increments under a federal award and options, even if not yet exercised.

GENERAL REQUIREMENTS

You will administer your project in compliance with the HHS Administrative and National Policy Requirements found at <https://www.hhs.gov/sites/default/files/hhs-administrative-national-policy-requirements.pdf>.

Termination (45 CFR Part 75.372) applies to this award and states, in part, the following:

This award may be terminated in whole or in part:

- (1) By the HHS awarding agency or pass-through entity, if a non-Federal entity fails to comply with the terms and conditions of a Federal award;
- (2) By the HHS awarding agency or pass-through entity for cause;
- (3) By the HHS awarding agency or pass-through entity with the consent of the non-Federal entity, in which case the two parties must agree upon the termination conditions, including the effective date and, in the case of partial termination, the portion to be terminated;
- (4) By the non-Federal entity upon sending to the HHS awarding agency or pass-through entity written notification setting forth the reasons for such termination, the effective date, and, in the case of partial termination, the portion to be terminated.

However, if the Federal awarding agency or pass-through entity determines in the case of partial termination that the reduced or modified portion of the Federal award or subaward will not accomplish the purposes for which the Federal award was made, the HHS awarding agency or pass-through entity may terminate the Federal award in its entirety.

Travel Cost: In accordance with HHS Grants Policy Statement, travel costs are allowable when the travel will provide a direct benefit to the project or program. To prevent disallowance of cost, the recipient is responsible for ensuring travel costs are clearly stated in their budget narrative and are applied in accordance with their organization's established travel policies and procedures. The recipient's established travel policies and procedures must also meet the requirements of 45 CFR Part 75.474.

Food and Meals: Costs associated with food or meals are allowable when consistent with applicable federal regulations and HHS policies. See <https://www.hhs.gov/grants/contracts/contract-policies-regulations/spending-on-food/index.html>. In addition, costs must be clearly stated in the budget narrative and be consistent with organization approved policies. Recipients must make a determination of reasonableness and organization approved policies must meet the requirements of 45 CFR Part 75.432.

Prior Approval: All requests which require prior approval, must bear the signature (or electronic authorization) of the authorized organization representative. The recipient should submit these requests no later than 120 days prior to the budget period's end date to ensure ample time remains to process and carry-out the request. Additionally, any requests involving funding issues must include an itemized budget and a narrative justification of the request.

The following types of requests are examples of actions that require prior approval, unless an expanded authority, or conversely a high-risk condition, is explicitly indicated in the NOA.

- Use of unobligated funds from prior budget period (Carryover)
- Lift funding restriction
- Significant redirection of funds (i.e., cumulative changes of 25% of total award)
- Change in scope
- Implement a new activity or enter into a sub-award that is not specified in the approved budget

- Apply for supplemental funds
- Extensions to period of performance

Templates for prior approval requests can be found at:

<https://www.cdc.gov/grants/already-have-grant/PriorApprovalRequests.html>.

Additional information on the electronic grants administration system CDC non-research awards utilize, GrantSolutions, can be found at: <https://www.cdc.gov/grants/grantsolutions/index.html>.

Recipient Contractual/Consultant Cost Agreements: In accordance with §2 [CFR 200.325](#), all supporting documentation related to the elements outlined in the [Budget Preparation Guidelines](#) must be maintained by the recipient and available upon request. Recipients may submit supporting documentation via GrantSolutions Grants Management Services (GSGMS) Grant Notes to the assigned Grants Management Specialist.

Key Personnel: In accordance with 45 CFR Part 75.308, CDC recipients must obtain prior approval from CDC for (1) change in the project director/principal investigator, authorized organizational representative, business official, financial director, or other key persons specified in the NOFO, application or award document; and (2) the disengagement from the project for more than three months, or a 25 percent reduction in time devoted to the project, by the approved project director or principal investigator.

Inventions: Acceptance of grant funds obligates recipients to comply with the standard patent rights clause in 37 CFR Part 401.14.

Acknowledgment of Federal Funding: When issuing statements, press releases, publications, requests for proposal, bid solicitations and other documents --such as toolkits, resource guides, websites, and presentations (hereafter "statements") --describing the projects or programs funded in whole or in part with U.S. Department of Health and Human Services (HHS) federal funds, the recipient must clearly state:

1. the percentage and dollar amount of the total costs of the program or project funded with federal money; and,
2. the percentage and dollar amount of the total costs of the project or program funded by non-governmental sources.

When issuing statements resulting from activities supported by HHS financial assistance, the recipient entity must include an acknowledgement of federal assistance using one of the following or a similar statement.

If the HHS Grant or Cooperative Agreement is NOT funded with other non-governmental sources:

This [project/publication/program/website, etc.] [is/was] supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$XX with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

If the HHS Grant or Cooperative Agreement IS partially funded with other non-governmental sources:

This [project/publication/program/website, etc.] [is/was] supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$XX with XX percentage funded by CDC/HHS and \$XX amount and XX percentage funded by non- government source(s). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

The federal award total must reflect total costs (direct and indirect) for all authorized funds (including supplements and carryover) for the total competitive segment up to the time of the public statement.

Any amendments by the recipient to the acknowledgement statement must be coordinated with the HHS Awarding Agency.

If the recipient plans to issue a press release concerning the outcome of activities supported by HHS financial assistance, it should notify the HHS Awarding Agency in advance to allow for coordination.

Copyright Interests Provision: This provision is intended to ensure that the public has access to the results and accomplishments of public health activities funded by CDC. Pursuant to applicable grant regulations and CDC's Public Access Policy, Recipient agrees to submit into the National Institutes of Health (NIH) Manuscript Submission (NIHMS) system an electronic version of the final, peer-reviewed manuscript of any such work developed under this award upon acceptance for publication, to be made publicly available without any embargo or delay after publication. Also, at the time of submission, Recipient and/or the Recipient's submitting author must also post the manuscript through PubMed Central (PMC) without any embargo or delay after publication. The recipient must obtain prior approval from the CDC for any exception to this provision.

The author's final, peer-reviewed manuscript is defined as the final version accepted for journal publication and includes all modifications from the publishing peer review process, and all graphics and supplemental material associated with the article. Recipient and its submitting authors working under this award are responsible for ensuring that any publishing or copyright agreements concerning submitted article reserve adequate right to fully comply with this provision and the license reserved by CDC.

The manuscript will be hosted in both PMC and the CDC Stacks institutional repository system. In progress reports for this award, recipient must identify publications subject to the CDC Public Access Policy by using the applicable NIHMS identification number for up to three (3) months after the publication date and the PubMed Central identification number (PMCID) thereafter.

Disclaimer for Conference/Meeting/Seminar Materials: If a conference/meeting/seminar is funded by a grant, cooperative agreement, sub-grant and/or a contract, the recipient must include the following statement on conference materials, including promotional materials, agenda, and internet sites:

Funding for this conference was made possible (in part) by the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

Logo Use for Conference and Other Materials: Neither the Department of Health and Human Services (HHS) nor the CDC logo may be displayed if such display would cause confusion as to the funding source or give false appearance of Government endorsement. Use of the HHS name or logo is governed by U.S.C. Part 1320b-10, which prohibits misuse of the HHS name and emblem in written communication. As a general matter, a non-federal entity is not authorized to use the HHS name or logo. Moreover, the HHS Office of the Inspector General has authority to impose civil monetary penalties for violations (42 CFR Part 1003). The appropriate use of the HHS logo is subject to review and approval of the HHS Assistant Secretary for Public Affairs (ASPA), and if granted would be governed by a logo license agreement setting forth the terms and conditions of use.

Additionally, the CDC logo cannot be used by the recipient without the express, written consent of CDC, generally in the form of a logo license agreement setting forth the terms and conditions of use. The Program Official/Project Officer identified in the NOA can assist with facilitating such a request. It is the responsibility of the recipient to request consent for use of the logo in sufficient detail to ensure a complete depiction and disclosure of all uses of the Government logos. In all cases for utilization of Government logos, the recipient must ensure written consent is received.

Equipment and Products: To the greatest extent practical, all equipment and products purchased with CDC funds should be American made. CDC defines equipment as tangible non-expendable personal property (including exempt property) charged directly to an award having a useful life of more than one year AND an acquisition cost of \$10,000 or more per unit. However, consistent with recipient policy, a lower threshold may be established. Please provide the information to the Grants Management Officer to establish a lower equipment threshold to reflect your organization's policy. The recipient may use its own property management standards and procedures, provided it observes provisions in applicable grant regulations found at 45 CFR Part 75.

Federal Information Security Management Act (FISMA): All information systems, electronic or hard copy, that contain federal data must be protected from unauthorized access. This standard also applies to information associated with CDC grants. Congress and the OMB have instituted laws, policies and directives that govern the creation and implementation of federal information security practices that pertain specifically to grants and contracts. The current regulations are pursuant to the Federal Information Security Management Act (FISMA), Title III of the E-Government Act of 2002, PL 107-347.

FISMA applies to CDC recipients only when recipients collect, store, process, transmit or use information on behalf of HHS or any of its component organizations. In all other cases, FISMA is not applicable to recipients of grants, including cooperative agreements. Under FISMA, the recipient retains the original data and intellectual property, and is responsible for the security of

these data, subject to all applicable laws protecting security, privacy, and research. If/When information collected by a recipient is provided to HHS, responsibility for the protection of the HHS copy of the information is transferred to HHS and it becomes the agency's responsibility to protect that information and any derivative copies as required by FISMA.

For the full text of the requirements under Federal Information Security Management Act (FISMA), Title III of the E- Government Act of 2002 Pub. L. No. 107-347, please review the following website: <https://www.govinfo.gov/content/pkg/PLAW-107publ347/pdf/PLAW-107publ347.pdf>.

Whistleblower Protections: As a recipient of this award, you must comply with the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2013 (Pub. L. 112-239, 41 U.S.C. § 4712) "Enhancement of contractor protection from reprisal for disclosure of certain information," and 48 CFR part 3 subpart 3.9, "Whistleblower Protections for Contractor Employees." For more information see: <https://oig.hhs.gov/fraud/whistleblower/>.

Cybersecurity Requirements: Recipients shall develop plans and procedures, modeled after the NIST Cybersecurity framework, to protect HHS and CDC systems and data, if the following conditions are met: 1) recipients, subrecipients, or third-party entities have ongoing and consistent access to HHS owned or operated information or operational technology systems and 2) recipients, subrecipients, or third-party entities receive, maintain, transmit, store, access, exchange, process, or utilize personal identifiable information (PII) or personal health information (PHI) obtained from the awarding HHS agency for the purposes of executing the award. Where both conditions exist, recipients must develop cybersecurity plans and procedures modeled after the NIST Cybersecurity framework (<https://www.nist.gov/cyberframework>) to protect HHS systems and data.

PAYMENT INFORMATION

Fraud Waste or Abuse: The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted online at <https://tips.oig.hhs.gov/> or by mail to U.S. Department of Health and Human Services, Office of the Inspector General, Attn: OIG HOTLINE OPERATIONS, P.O. Box 23489 Washington DC 20026. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

For additional information, see: <https://oig.hhs.gov/fraud/report-fraud/>.

Automatic Drawdown (Direct/Advance Payments): Payments under CDC awards will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS), under automatic drawdown, unless specified otherwise in the NOA. Recipients must comply with requirements imposed by the PMS on-line system. Questions concerning award payments or audit inquiries should be directed to the payment management services office.

PMS Website: <https://pms.psc.gov/>

PMS Phone Support: +1(877)614-5533

PMS Email Support: PMSSupport@psc.gov

Payment Management System Subaccount: Funds awarded in support of approved activities will be obligated in an established subaccount in the PMS. Funds must be used in support of approved activities in the NOFO and the approved application. All award funds must be tracked and reported separately.

Exchange Rate: All requests for funds contained in the budget, shall be stated in U.S. dollars. Once an award is made, CDC will generally not compensate foreign recipients for currency exchange fluctuations through the issuance of supplemental awards.

Acceptance of the Terms of an Award: By drawing or otherwise obtaining funds from PMS, the recipient acknowledges acceptance of the terms and conditions of the award and is obligated to perform in accordance with the requirements of the award. If the recipient cannot accept the terms, the recipient should notify the Grants Management Officer within thirty (30) days of receipt of the NOA.

Certification Statement: By drawing down funds, the recipient certifies that proper financial management controls and accounting systems, to include personnel policies and procedures, have been established to adequately administer federal awards and funds drawn down. Recipients must comply with all terms and conditions in the NOFO, outlined in their NOA, grant policy terms and conditions contained in applicable HHS Grant Policy Statements, and requirements imposed by program statutes and regulations and HHS grants administration regulations, as applicable, as well as any regulations or limitations in any applicable appropriations acts.

CLOSEOUT REQUIREMENTS

In accordance with 2 CFR 200.344, recipients must submit all closeout reports identified in this section within 120 days of the period of performance end date. The reporting timeframe is the full period of performance. If the recipient does not submit all reports in accordance with this section and the terms and conditions of the Federal Award, CDC may proceed to close out with the information available within one year of the period of performance end date unless otherwise directed by authorizing statutes. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI). If recipients do not submit all closeout reports identified in this section within one year of the period of performance end date, then CDC must report recipients' material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently Responsibility/Qualification section of [SAM.gov](https://www.sam.gov)). CDC may also pursue other enforcement actions per 45 CFR 75.371.

Final Performance Progress and Evaluation Report (PPER): This report should include the information specified in the NOFO and is submitted upon solicitation from the GMS/GMO via www.grantsolutions.gov. At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims;
- Description of results (positive or negative) considered significant; and
- List of publications resulting from the project, with plans, if any, for further publication.

All manuscripts published as a result of the work supported in part or whole by the grant must be submitted with the performance progress reports.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and expended during the timeframe covered by the report. The Final FFR, SF-425 is required and must be submitted no later than 120 days after the period of performance end date through recipient online accounts in the Payment Management System. The final FFR will consolidate data reporting responsibilities to one entry point within PMS which will assist with the reconciliation of expenditures and disbursements to support the timely close-out of grants.

The final FFR must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

Every recipient should already have a PMS account to allow access to complete the SF-425.

Additional guidance on submission of Federal Financial Reports can be found at <https://www.cdc.gov/grants/documents/change-in-federal-reporting-fy-2021-recipients.pdf>.

Equipment and Supplies - Tangible Personal Property Report (SF-428): A completed Tangible Personal Property Report SF-428 and Final Report SF-428B addendum must be submitted, along with any Supplemental Sheet SF-428S detailing all major equipment acquired or furnished under this project with a unit acquisition cost of \$10,000 or more. Electronic versions of the forms can be downloaded by visiting: <https://www.grants.gov/forms/forms-repository/post-award-reporting-forms>.

If no equipment was acquired under an award, a negative report is required. The recipient must identify each item of equipment that it wishes to retain for continued use in accordance with 45 CFR Part 75. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award. CDC will notify the recipient if transfer to title will be required and provide disposition instruction on all major equipment.

Equipment with a unit acquisition cost of less than \$10,000 that is no longer to be used in projects or programs currently or previously sponsored by the federal government may be retained, sold, or otherwise disposed of, with no further obligation to the federal government (see 2 CFR 200.313(e)(1)).

CDC STAFF RESPONSIBILITIES

Roles and Responsibilities: Grants Management Specialists/Officers (GMO/GMS) and Program Officials (PO) work together to award and manage CDC grants and cooperative agreements. From the pre-planning stage to closeout of an award, grants management and program staff have specific roles and responsibilities for each phase of the grant cycle. Award specific terms and conditions will include contact information for the PO/GMO/GMS.

Program Official: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements including:

- The development of programs and NOFOs to meet the CDC's mission;
- Providing technical assistance to applicants in developing their applications, e.g., explanation of programmatic requirements, regulations, evaluation criteria, and

guidance to applicants on possible linkages with other resources;

- Providing technical assistance to recipients in the performance of their project; and
- Post-award monitoring of recipient performance such as review of progress reports, review of prior approval requests, conducting site visits, and other activities complementary to those of the GMO/GMS.

For Cooperative Agreements, substantial involvement is required from CDC. The PO is the federal official responsible for the collaboration or participation in carrying out the effort under the award. Substantial involvement will be detailed in the NOFO and award specific terms and conditions and may include, but is not limited to:

- Review and approval of one stage of work before work can begin on a subsequent stage;
- Review and approval of substantive programmatic provisions of proposed subawards or contracts (beyond existing federal review of procurement or sole source policies);
- Involvement in the selection of key relevant personnel;
- CDC and recipient collaboration or joint participation; and
- Implementing highly prescriptive requirements prior to award limiting recipient discretion with respect to scope of services, organizational structure, staffing, mode of operation, and other management processes.

Grants Management Officer: The GMO is the only official authorized to obligate federal funds and is responsible for signing the NOA, including revisions to the NOA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization. The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards including:

- Determining the appropriate award instrument, i.e., grant or cooperative agreement;
- Determining if an application meets the requirements of the NOFO;
- Ensuring objective reviews are conducted in an above-the-board manner and according to guidelines set forth in grants policy;
- Ensuring recipient compliance with applicable laws, regulations, and policies;
- Negotiating awards, including budgets;
- Responding to recipient inquiries regarding the business and administrative aspects of an award;
- Providing recipients with guidance on the closeout process and administering the closeout of grants;
- Receiving and processing reports and prior approval requests such as changes in funding, budget redirection, or changes to the terms and conditions of an award; and
- Maintaining the official grant file and program book.

Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards. Many of the functions described in the GMO section are performed by the GMS, on behalf of the GMO.

**Recipient Information****1. Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St
Madison, WI 53703-3445
608-267-3694

2. Congressional District of Recipient
02**3. Payment System Identifier (ID)**
1396006469A1**4. Employer Identification Number (EIN)**
396006469**5. Data Universal Numbering System (DUNS)**
036448835**6. Recipient's Unique Entity Identifier (UEI)**
CG2SZ7HCNV54**7. Project Director or Principal Investigator**

Ms. Traci DeSalvo
Communicable Diseases Epidemiology Section Chief
traci.desalvo@wi.gov
(608) 267-7321

8. Authorized Official

Ms. Debra Standridge
Deputy Secretary
Debra.Standridge@dhs.wisconsin.gov
608-266-8399

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Terrian Dixon
Grants Management Officer
thd4@cdc.gov
770-488-2774

10. Program Official Contact Information

Christine Mills
Public Health Advisor
jjz3@cdc.gov
770-488-5096

Federal Award Information**11. Award Number**

6 NU50CK000534-05-15

12. Unique Federal Award Identification Number (FAIN)

NU50CK000534

13. Statutory Authority

301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

14. Federal Award Project Title

Wisconsin's Application for the 2019 Epidemiology and Laboratory Capacity for Prevention and Control of
Emerging Infectious Diseases (ELC) Cooperative Agreement

15. Assistance Listing Number

93.323

16. Assistance Listing Program Title

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

17. Award Action Type

Administrative Action

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 08/01/2023 - **End Date** 03/24/2025

20. Total Amount of Federal Funds Obligated by this Action \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$21,953,928.00

22. Offset \$567,455.00

23. Total Amount of Federal Funds Obligated this budget period \$14,211,000.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$14,211,000.00

26. Period of Performance Start Date 08/01/2019 - **End Date** 03/24/2025

**27. Total Amount of the Federal Award including Approved
Cost Sharing or Matching this Period of Performance** \$758,496,397.86

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Percy Jernigan

30. Remarks

Department Authority



DEPARTMENT OF HEALTH AND HUMAN SERVICES

4832

Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU50CK000534-05-15

FAIN# NU50CK000534

Federal Award Date: 03/24/2025

Recipient Information**Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St
Madison, WI 53703-3445
608-267-3694

Congressional District of Recipient

02

Payment Account Number and Type

1396006469A1

Employer Identification Number (EIN) Data

396006469

Universal Numbering System (DUNS)

036448835

Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

31. Assistance Type

Cooperative Agreement

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$8,517,563.00
b. Fringe Benefits	\$2,134,115.00
c. Total Personnel Costs	\$10,651,678.00
d. Equipment	\$0.00
e. Supplies	\$16,800.00
f. Travel	\$129,001.00
g. Construction	\$0.00
h. Other	(\$2,543,247.00)
i. Contractual	\$28,082,426.00
j. TOTAL DIRECT COSTS	\$36,336,658.00
k. INDIRECT COSTS	\$395,725.00
l. TOTAL APPROVED BUDGET	\$36,732,383.00
m. Federal Share	\$36,732,383.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390GKT	19NU50CK000534EDEXC5	CK	41.51	93.323	\$0.00	75-2122-0140
0-9390F7F	19NU50CK000534C4	CK	41.51	93.323	\$0.00	75-X-0140
0-9390EWQ	19NU50CK000534JKOWC3	CK	41.51	93.323	\$0.00	75-2024-0943



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU50CK000534-05-15

FAIN# NU50CK000534

Federal Award Date: 03/24/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

STATE OF WISCONSIN DEPARTMENT OF HEALTH SERVICES

6 NU50CK000534-05-15

1. REVISED: TERMS AND CONDITIONS

TERMS AND CONDITIONS OF AWARD

Termination: The purpose of this amendment is to terminate the use of any remaining COVID-19 funding associated with this award. The termination of this funding is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of use of funding under the listed document number(s) is effective as of the date set out in your Notice of Award.

Impacted document numbers are included on page 2 of this Notice of Award (NoA).

No additional activities can be conducted, and no additional costs may be incurred, as it relates to these funds. Unobligated award balances of COVID-19 funding will be de-obligated by CDC. Award activities under other funding may continue consistent with the terms and conditions of the award.

Final Federal Financial Report (FFR, SF-425): Within 30 days please submit final FFR’s for impacted document numbers. The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

All other terms and conditions of this award remain in effect.

**Recipient Information****1. Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St
Madison, WI 53703-3445
608-267-3694

2. Congressional District of Recipient

02

3. Payment System Identifier (ID)

1396006469A1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

7. Project Director or Principal Investigator

Ms. Traci DeSalvo
Communicable Diseases Epidemiology Section Chief
traci.desalvo@wi.gov
(608) 267-7321

8. Authorized Official

Ms. Debra Standridge
Deputy Secretary
Debra.Standridge@dhs.wisconsin.gov
608-266-8399

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Terrian Dixon
Grants Management Officer
thd4@cdc.gov
770-488-2774

10. Program Official Contact Information

Christine Mills
Public Health Advisor
jjz3@cdc.gov
770-488-5096

Federal Award Information**11. Award Number**

6 NU50CK000534-05-16

12. Unique Federal Award Identification Number (FAIN)

NU50CK000534

13. Statutory Authority

301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

14. Federal Award Project Title

Wisconsin's Application for the 2019 Epidemiology and Laboratory Capacity for Prevention and Control of
Emerging Infectious Diseases (ELC) Cooperative Agreement

15. Assistance Listing Number

93.323

16. Assistance Listing Program Title

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

17. Award Action Type

Administrative Action

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 08/01/2023 - **End Date** 07/31/2027

20. Total Amount of Federal Funds Obligated by this Action \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$21,953,928.00

22. Offset \$567,455.00

23. Total Amount of Federal Funds Obligated this budget period \$14,211,000.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$14,211,000.00

26. Period of Performance Start Date 08/01/2019 - **End Date** 07/31/2027

**27. Total Amount of the Federal Award including Approved
Cost Sharing or Matching this Period of Performance** \$758,496,397.86

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Percy Jernigan

30. Remarks

This is an internal administrative action. No action is required from the recipient.

**Recipient Information****Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St
Madison, WI 53703-3445
608-267-3694

Congressional District of Recipient

02

Payment Account Number and Type

1396006469A1

Employer Identification Number (EIN) Data

396006469

Universal Numbering System (DUNS)

036448835

Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

31. Assistance Type

Cooperative Agreement

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$8,517,563.00
b. Fringe Benefits	\$2,134,115.00
c. Total Personnel Costs	\$10,651,678.00
d. Equipment	\$0.00
e. Supplies	\$16,800.00
f. Travel	\$129,001.00
g. Construction	\$0.00
h. Other	(\$2,543,247.00)
i. Contractual	\$28,082,426.00
j. TOTAL DIRECT COSTS	\$36,336,658.00
k. INDIRECT COSTS	\$395,725.00
l. TOTAL APPROVED BUDGET	\$36,732,383.00
m. Federal Share	\$36,732,383.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-939017Y	19NU50CK000534ASA2C6	CK	41.51	93.323	\$0.00	75-X-0943



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU50CK000534-05-16

FAIN# NU50CK000534

Federal Award Date: 03/25/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

**Recipient Information****1. Recipient Name**

Wisconsin Department of Health
1 W Wilson St Rm 651
Madison, WI 53703-3445
[NO DATA]

2. Congressional District of Recipient

02

3. Payment System Identifier (ID)

1396006469C1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier**7. Project Director or Principal Investigator**

Ms. Susan Uttech
susan.uttech@dhs.wisconsin.gov
999-999-9999

8. Authorized Official

Ms. Julie Willems Van Dijk
Deputy Secretary
DHSGGrantReview@wisconsin.gov
608-266-8399

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Ms. Niki Morrow
Grants Management Specialist
qkn7@cdc.gov
404-498-2085

10. Program Official Contact Information

Ms. Christine Graaf
khx2@cdc.gov
404-498-0442

Federal Award Information**11. Award Number**

1 NH75OT000039-01-00

12. Unique Federal Award Identification Number (FAIN)

NH75OT000039

13. Statutory Authority

317(K)(2) OF PHSA 42USC 247B(K)(2)

14. Federal Award Project Title

This grant will provide funding to address COVID-19 and advance health equity (e.g., through strategies, interventions, and services that consider systemic barriers).

15. Assistance Listing Number

93.391

16. Assistance Listing Program Title

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises

17. Award Action Type

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 06/01/2021 - **End Date** 05/31/2023

20. Total Amount of Federal Funds Obligated by this Action \$27,184,789.00

20a. Direct Cost Amount \$27,184,789.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$0.00

22. Offset \$0.00

23. Total Amount of Federal Funds Obligated this budget period \$0.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$27,184,789.00

26. Project Period Start Date 06/01/2021 - **End Date** 05/31/2023

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period Not Available

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Shirley K Byrd
Grants Management Officer

30. Remarks



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Award

Centers for Disease Control and Prevention

Award# 1 NH75OT000039-01-00

FAIN# NH75OT000039

Federal Award Date: 05/27/2021

Recipient Information**Recipient Name**

Wisconsin Department of Health
1 W Wilson St Rm 651
Madison, WI 53703-3445
[NO DATA]

Congressional District of Recipient

02

Payment Account Number and Type

1396006469C1

Employer Identification Number (EIN) Data

396006469

Universal Numbering System (DUNS)

036448835

Recipient's Unique Entity Identifier

Not Available

31. Assistance Type

Project Grant

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$4,799,559.00
b. Fringe Benefits	\$2,083,009.00
c. Total Personnel Costs	\$6,882,568.00
d. Equipment	\$0.00
e. Supplies	\$87,840.00
f. Travel	\$290,010.00
g. Construction	\$0.00
h. Other	\$5,202,812.00
i. Contractual	\$14,721,559.00
j. TOTAL DIRECT COSTS	\$27,184,789.00
k. INDIRECT COSTS	\$0.00
l. TOTAL APPROVED BUDGET	\$27,184,789.00
m. Federal Share	\$27,184,789.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000039C5	OT	41.51	\$27,184,789.00	75-2122-0140



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 1 NH75OT000039-01-00

FAIN# NH75OT000039

Federal Award Date: 05/27/2021

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

Wisconsin Department of Health

1 NH75OT000039-01-00

1. OT21-2103 Terms and Conditions

Recipient: Wisconsin Department of Health Services

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-OT21-2103, entitled National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities, and application dated May 3, 2021, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of \$27,184,789 is approved for a two year performance and budget period, which is June 1, 2021 through May 31, 2023. All future funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Component/Project Funding: The NOFO provides for the funding of multiple components under this award. The approved component funding levels for this notice of award are:

NOFO Component	Amount
Base funding	\$17,852,297
State Rural Carveout	\$9,332,492

Coronavirus Disease 2019 (COVID-19) Funds: A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260) and/or the American Rescue Plan of 2021 [P.L. 117-2] agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.

In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with

guidance and direction from HHS and/or CDC. HHS laboratory reporting guidance is posted at: <https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf>.

Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.

This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

Financial Assistance Mechanism: Grant

Budget Revision Requirement: By July 1, 2021 the recipient must submit a revised budget with a narrative justification. Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

Pre-Award Costs: Pre-award costs dating back to March 15, 2021 – and directly related to the COVID-19 outbreak response are allowable.

FUNDING RESTRICTIONS AND LIMITATIONS

Indirect Costs: Indirect costs are not approved for this award, because an approved Indirect Cost Rate Agreement has not been established. To have indirect costs approved for this grant, submit an approved indirect cost rate agreement to the grants management specialist no later than July 1, 2021.

REPORTING REQUIREMENTS

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
John McGee, Grants Management Specialist
Centers for Disease Control and Prevention
Global Health Services Branch
2939 Flowers Road
Atlanta, GA 30341

Email: qsj4@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or

Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

PROGRAM OR FUNDING SPECIFIC CLOSEOUT REQUIREMENTS

The final programmatic report format required is the following.

Final Performance Progress and Evaluation Report: This report should include the information specified in the NOFO and is submitted 90 days following the end of the period of performance via www.grantsolutions.gov . At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Additional guidance may be provided by the GMS and found at:
<https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html>

CDC Staff Contacts

Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards.

Program/Project Officer: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

**Recipient Information****1. Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St Rm 651
Madison, WI 53703-3445
608-267-3694

2. Congressional District of Recipient

02

3. Payment System Identifier (ID)

1396006469C1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

7. Project Director or Principal Investigator

Mrs. Cecilia Culp
Senior Health Equity Advisor
cecilia.culp@dhs.wisconsin.gov
608-266-1251

8. Authorized Official

Ms. Debra Standridge
Deputy Secretary
Debra.Standridge@dhs.wisconsin.gov
608-266-8399

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Rhonda DeBouse
wzn5@cdc.gov
770-488-3198

10. Program Official Contact Information

Henry Anaya
Program Officer
syz4@cdc.gov
404-498-0421

Federal Award Information**11. Award Number**

6 NH75OT000039-01-06

12. Unique Federal Award Identification Number (FAIN)

NH75OT000039

13. Statutory Authority

317(K)(2) OF PHSA 42USC 247B(K)(2)

14. Federal Award Project Title

This grant will provide funding to address COVID-19 and advance health equity (e.g., through strategies, interventions, and services that consider systemic barriers).

15. Assistance Listing Number

93.391

16. Assistance Listing Program Title

Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises

17. Award Action Type

Terminate

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 06/01/2021 - **End Date** 03/24/2025

20. Total Amount of Federal Funds Obligated by this Action \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$0.00

22. Offset \$0.00

23. Total Amount of Federal Funds Obligated this budget period \$27,184,789.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$27,184,789.00

26. Period of Performance Start Date 06/01/2021 - **End Date** 03/24/2025

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance \$27,184,789.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Ester Edward
Grants Management Officer

30. Remarks

Department Authority



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH75OT000039-01-06

FAIN# NH75OT000039

Federal Award Date: 03/24/2025

Recipient Information**Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St Rm 651
Madison, WI 53703-3445
608-267-3694

Congressional District of Recipient

02

Payment Account Number and Type

1396006469C1

Employer Identification Number (EIN) Data

396006469

Universal Numbering System (DUNS)

036448835

Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

31. Assistance Type

Project Grant

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$4,663,361.00
b. Fringe Benefits	\$2,023,899.00
c. Total Personnel Costs	\$6,687,260.00
d. Equipment	\$0.00
e. Supplies	\$321,840.00
f. Travel	\$290,010.00
g. Construction	\$0.00
h. Other	\$1,020,232.00
i. Contractual	\$18,539,012.00
j. TOTAL DIRECT COSTS	\$26,858,354.00
k. INDIRECT COSTS	\$326,435.00
l. TOTAL APPROVED BUDGET	\$27,184,789.00
m. Federal Share	\$27,184,789.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H06	21NH75OT000039C5	OT	41.51	93.391	\$0.00	75-2122-0140



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH75OT000039-01-06

FAIN# NH75OT000039

Federal Award Date: 03/24/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

STATE OF WISCONSIN DEPARTMENT OF HEALTH SERVICES

6 NH75OT000039-01-06

1. Termination Action TC – FINAL

TERMS AND CONDITIONS OF AWARD

Termination: The purpose of this amendment is to terminate this award which is funded by COVID-19 supplemental appropriations. The termination of this award is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of this award is effective as of the date set out in your Notice of Award.

No additional activities can be conducted, and no additional costs may be incurred. Unobligated award balances will be de-obligated by CDC.

Closeout: In order to facilitate an orderly closeout, we are requesting that you submit all closeout reports identified below within thirty (30) days of the date of this NoA. Submit the documentation as a “Grant Closeout” amendment in GrantSolutions. The reporting timeframe is the full period of performance. Please note, if you fail to submit timely and accurate reports, CDC may also pursue other enforcement actions per 45 CFR Part 75.371.

Final Performance/Progress Report: This report should include the information specified in the Notice of Funding Opportunity (NOFO). At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

Equipment and Supplies - Tangible Personal Property Report (SF-428): A completed SF-428 detailing all major equipment acquired with a unit acquisition cost of \$10,000 or more. If no equipment was acquired under the award, a negative report is required

**Recipient Information****1. Recipient Name**

Wisconsin Department of Health
1 W Wilson St Rm 651
Madison, WI 53703-3445
[NO DATA]

2. Congressional District of Recipient

02

3. Payment System Identifier (ID)

1396006469C1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier**7. Project Director or Principal Investigator**

Ms. Mary Pesik
Chronic Disease Prevention Unit Supervisor
mary.pesik@wisconsin.gov
608-267-3694

8. Authorized Official

Ms. Julie Willems Van Dijk
Business Official / Deputy Secretary
dhsgrantreview@wisconsin.gov
608-266-8399

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Mrs. Rhonda Latimer
Grants Management Officer
ITO1@cdc.gov
7704881647

10. Program Official Contact Information

Dr. Monique Young
Public Health Advisor/Project Officer
Division of Cancer Prevention and Control
hza4@cdc.gov
770-488-3434

Federal Award Information**11. Award Number**

1 NU58DP007012-01-00

12. Unique Federal Award Identification Number (FAIN)

NU58DP007012

13. Statutory Authority

Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") Public Law 116-136 Public Health Service Act 42 U.S.C. 301(a)

14. Federal Award Project Title

Wisconsin Community Health Workers for COVID Response and Recovery

15. Assistance Listing Number

93.495

16. Assistance Listing Program Title

Community Health Workers for Public Health Response and Resilient

17. Award Action Type

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 08/31/2021 - **End Date** 08/30/2022

20. Total Amount of Federal Funds Obligated by this Action \$3,000,000.00

20a. Direct Cost Amount \$2,978,477.20

20b. Indirect Cost Amount \$21,522.80

21. Authorized Carryover \$0.00

22. Offset \$0.00

23. Total Amount of Federal Funds Obligated this budget period \$0.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$3,000,000.00

26. Project Period Start Date 08/31/2021 - **End Date** 08/30/2024

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period Not Available

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Stephanie Latham
Team Lead, Grants Management Officer

30. Remarks



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Award

Centers for Disease Control and Prevention

Award# 1 NU58DP007012-01-00

FAIN# NU58DP007012

Federal Award Date: 08/23/2021

Recipient Information**Recipient Name**

Wisconsin Department of Health
1 W Wilson St Rm 651
Madison, WI 53703-3445
[NO DATA]

Congressional District of Recipient

02

Payment Account Number and Type

1396006469C1

Employer Identification Number (EIN) Data

396006469

Universal Numbering System (DUNS)

036448835

Recipient's Unique Entity Identifier

Not Available

31. Assistance Type

Project Grant

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$331,120.00
b. Fringe Benefits	\$143,706.08
c. Total Personnel Costs	\$474,826.08
d. Equipment	\$0.00
e. Supplies	\$51,067.12
f. Travel	\$14,375.00
g. Construction	\$0.00
h. Other	\$77,840.00
i. Contractual	\$2,360,369.00
j. TOTAL DIRECT COSTS	\$2,978,477.20
k. INDIRECT COSTS	\$21,522.80
l. TOTAL APPROVED BUDGET	\$3,000,000.00
m. Federal Share	\$3,000,000.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H3H	21NU58DP007012C3	DP	41.51	\$3,000,000.00	75-2024-0943

AWARD ATTACHMENTS

Wisconsin Department of Health

1 NU58DP007012-01-00

1. Terms and Conditions

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number DP21-2109, entitled “Community Health Workers for COVID Response and Resilient Communities (CCR)”, and application dated May 20, 2021, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of \$3,000,000 is approved for the Year 1 budget period, which is August 31, 2021 through August 30, 2022. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third-party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Component/Project Funding: The NOFO provides for the funding of multiple components under this award. The approved component funding levels for this notice of award are:

NOFO Component	Amount
Component A	\$0
Component B	\$3,000,000
Component C	\$0

Coronavirus Disease 2019 (COVID-19) Funds: A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the “CARES Act”) (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260) and/or the American Rescue Plan of 2021 [P.L. 117-2] agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual’s home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.

In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC. HHS laboratory reporting guidance is posted at: <https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf>.

Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.

This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

Financial Assistance Mechanism: Grant

Budget Revision Requirement: By September 30, 2021 the recipient must submit a revised budget with a narrative justification in accordance with the CDC Budget Preparation Guidelines for the following cost:

- **Approved Funding:** recipient must submit a revised budget with a narrative justification based on the approved funding of \$3,000,000
- **Salaries/Wages:** The recipient has positions and their costs listed; however, there is no named personnel, salary, level of effort or calculations. Please provide this information.
- **Fringe Benefits:** The fringe benefits are calculated using 43.4%. The elements that comprise the fringe benefits are not provided, and no calculations provided.
- **Supplies:** The proposal for supplies does not include specific breakdowns.
- **Contractual:** Provide all the elements for the contractors listed as follows:
 1. Name of Contractor
 2. Method of Selection
 3. Period of Performance
 4. Scope of Work
 5. Method of Accountability
 6. Itemized Budget and Justification

Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

Expanded Authority: The recipient is permitted the following expanded authority in the administration of the award.

- ☒ **Carryover of unobligated balances from one budget period to a subsequent budget period.** Unobligated funds may be used for purposes within the scope of the project as originally approved. Recipients will report use, or intended use, of unobligated funds in Section 12 "Remarks" of the annual Federal Financial Report. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the recipient's authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset CDC funding for a subsequent budget period, or use a combination of these actions.

FUNDING RESTRICTIONS AND LIMITATIONS

Indirect costs: Indirect costs are approved based on the recipient's approved Cost Allocation Plan dated June 30, 2017.

REPORTING REQUIREMENTS

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
Rhonda Latimer, Grants Management Officer/Specialist
Centers for Disease Control and Prevention
Branch 5
2939 Flowers Road
Atlanta GA 30341
Email: RDLatimer@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the “P Account”. Funds must be used in support of approved activities in the NOFO and the approved application.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known to draw down funds.

CDC Staff Contacts

Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards.

GMS Contact:

Rhonda Latimer, Grants Management Specialist
Centers for Disease Control and Prevention
Branch 5
2939 Flowers Road
Atlanta GA 30341
Telephone: 770-488-1647
Email: RDLatimer@cdc.gov

Program/Project Officer: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

Programmatic Contact:

Monique Young, Project Officer
Centers for Disease Control and Prevention
National Center for Disease Prevention and Health
Telephone: 770-488-3434
Email: HZA4@cdc.gov

Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

GMO Contact:

Stephanie Latham, Grants Management Officer
Centers for Disease Control and Prevention
Branch 5
Telephone: 770-488-2197
Email: FZV6@cdc.gov

**Recipient Information****1. Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St Rm 651
Madison, WI 53703-3445
608-267-3694

2. Congressional District of Recipient
02**3. Payment System Identifier (ID)**

1396006469C1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

7. Project Director or Principal Investigator

Ms. Mary Pesik
Chronic Disease Prevention Unit Supervisor
mary.pesik@wisconsin.gov
6085768879

8. Authorized Official

Ms. Debra Standridge
Deputy Secretary
Debra.Standridge@dhs.wisconsin.gov
608-266-8399

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Natasha Jones
Grants Management Officer
mgz2@cdc.gov
770-488-1649

10. Program Official Contact Information

Ms. Perrin Hicks
Program Officer
swy2@cdc.gov
7704880826

Federal Award Information**11. Award Number**

6 NU58DP007012-03-05

12. Unique Federal Award Identification Number (FAIN)

NU58DP007012

13. Statutory Authority

Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") Public Law 116-136 Public Health
Service Act 42 U.S.C. 301(a)

14. Federal Award Project Title

Wisconsin Community Health Workers for COVID Response and Recovery

15. Assistance Listing Number

93.495

16. Assistance Listing Program Title

Community Health Workers for Public Health Response and Resilient

17. Award Action Type

Terminate

18. Is the Award R&D?

No

Summary Federal Award Financial Information**19. Budget Period Start Date** 08/31/2023 - **End Date** 03/24/2025**20. Total Amount of Federal Funds Obligated by this Action** \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$0.00**22. Offset** \$0.00**23. Total Amount of Federal Funds Obligated this budget period** \$3,000,000.00**24. Total Approved Cost Sharing or Matching, where applicable** \$0.00**25. Total Federal and Non-Federal Approved this Budget Period** \$3,000,000.00**26. Period of Performance Start Date** 08/31/2021 - **End Date** 03/24/2025**27. Total Amount of the Federal Award including Approved
Cost Sharing or Matching this Period of Performance** \$9,000,000.00**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Tajsha LaShore

30. Remarks

Department Authority



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU58DP007012-03-05

FAIN# NU58DP007012

Federal Award Date: 03/24/2025

Recipient Information**Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St Rm 651
Madison, WI 53703-3445
608-267-3694

Congressional District of Recipient

02

Payment Account Number and Type

1396006469C1

Employer Identification Number (EIN) Data

396006469

Universal Numbering System (DUNS)

036448835

Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

31. Assistance Type

Project Grant

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$336,877.00
b. Fringe Benefits	\$146,205.00
c. Total Personnel Costs	\$483,082.00
d. Equipment	\$0.00
e. Supplies	\$30,526.00
f. Travel	\$22,525.00
g. Construction	\$0.00
h. Other	\$55,660.00
i. Contractual	\$2,384,962.00
j. TOTAL DIRECT COSTS	\$2,976,755.00
k. INDIRECT COSTS	\$23,245.00
l. TOTAL APPROVED BUDGET	\$3,000,000.00
m. Federal Share	\$3,000,000.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H3H	21NU58DP007012C3	DP	41.51	93.495	\$0.00	75-2024-0943
2-9390H3H	21NU58DP007012C3	DP	41.51	93.495	\$0.00	75-2024-0943
3-9390HGA	21NU58DP007012C3	DP	41.51	93.495	\$0.00	75-X-0140

AWARD ATTACHMENTS

STATE OF WISCONSIN DEPARTMENT OF HEALTH SERVICES

6 NU58DP007012-03-05

1. Terms and Conditions

TERMS AND CONDITIONS OF AWARD

Termination: The purpose of this amendment is to terminate this award which is funded by COVID-19 supplemental appropriations. The termination of this award is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of this award is effective as of the date set out in your Notice of Award.

No additional activities can be conducted, and no additional costs may be incurred. Unobligated award balances will be de-obligated by CDC.

Closeout: In order to facilitate an orderly closeout, we are requesting that you submit all closeout reports identified below within thirty (30) days of the date of this NoA. Submit the documentation as a “Grant Closeout” amendment in GrantSolutions. The reporting timeframe is the full period of performance. Please note, if you fail to submit timely and accurate reports, CDC may also pursue other enforcement actions per 45 CFR Part 75.371.

Final Performance/Progress Report: This report should include the information specified in the Notice of Funding Opportunity (NOFO). At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

Equipment and Supplies - Tangible Personal Property Report (SF-428): A completed SF-428 detailing all major equipment acquired with a unit acquisition cost of \$10,000 or more. If no equipment was acquired under the award, a negative report is required

**Recipient Information****1. Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St
Madison, WI 53703-3445
608-267-3694

2. Congressional District of Recipient
02**3. Payment System Identifier (ID)**

1396006469A1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

7. Project Director or Principal Investigator

Ms. Stephanie L Schauer
Stephanie.Schauer@wisconsin.gov
608-236-4125

8. Authorized Official

Ms. Debra Standridge
Deputy Secretary
Debra.Standridge@dhs.wisconsin.gov
608-266-8399

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Wayne Woods
kuv1@cdc.gov
770-488-2948

10. Program Official Contact Information

Nancy Wong
Program Officer
nbb9@cdc.gov
786-777-8767

Federal Award Information**11. Award Number**

6 NH23IP922611-05-09

12. Unique Federal Award Identification Number (FAIN)

NH23IP922611

13. Statutory Authority

Sections 317, 317(k)(2) of the Public Health Service Act (42 U.S.C. Sections 247b, 247b(k)(2) and 247c), as amended.

14. Federal Award Project Title

2023 supplemental funding for HHS Bridge Access Program, IIS modernization and Vaccine Confidence

15. Assistance Listing Number

93.268

16. Assistance Listing Program Title

Immunization Cooperative Agreements

17. Award Action Type

Administrative Action

18. Is the Award R&D?

No

Summary Federal Award Financial Information**19. Budget Period Start Date** 07/01/2023 - **End Date** 03/24/2025**20. Total Amount of Federal Funds Obligated by this Action** \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$18,130,465.00**22. Offset** \$2,363,092.00**23. Total Amount of Federal Funds Obligated this budget period** \$17,051,643.00**24. Total Approved Cost Sharing or Matching, where applicable** \$0.00**25. Total Federal and Non-Federal Approved this Budget Period** \$17,051,643.00**26. Period of Performance Start Date** 07/01/2019 - **End Date** 03/24/2025**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance** \$161,983,317.00**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Percy Jernigan

30. Remarks

Department Authority



DEPARTMENT OF HEALTH AND HUMAN SERVICES

4864

Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH23IP922611-05-09

FAIN# NH23IP922611

Federal Award Date: 03/24/2025

Recipient Information**Recipient Name**

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W Wilson St
Madison, WI 53703-3445
608-267-3694

Congressional District of Recipient

02

Payment Account Number and Type

1396006469A1

Employer Identification Number (EIN) Data

396006469

Universal Numbering System (DUNS)

036448835

Recipient's Unique Entity Identifier (UEI)

CG2SZ7HCNV54

31. Assistance Type

Cooperative Agreement

32. Type of Award

Other

33. Approved Budget

(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only

II. Total project costs including grant funds and all other financial participation

a. Salaries and Wages	\$5,551,358.00
b. Fringe Benefits	\$2,107,410.00
c. Total Personnel Costs	\$7,658,768.00
d. Equipment	\$0.00
e. Supplies	\$1,431,496.00
f. Travel	\$320,196.00
g. Construction	\$0.00
h. Other	\$1,723,965.00
i. Contractual	\$26,009,727.00
j. TOTAL DIRECT COSTS	\$37,144,152.00
k. INDIRECT COSTS	\$401,048.00
l. TOTAL APPROVED BUDGET	\$37,545,200.00
m. Federal Share	\$37,545,200.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390FG3	20NH23IP922611C3	IP	41.51	93.268	\$0.00	75-2024-0943
1-9390GKL	20NH23IP922611C5	IP	41.51	93.268	\$0.00	75-2124-0943
1-9390GUU	20NH23IP922611UDSPC5	IP	41.51	93.268	\$0.00	75-2124-0943
1-9390GWA	20NH23IP922611C6	IP	41.51	93.268	\$0.00	75-X-0943
2-9390K9M	20NH23IP922611IISC6	IP	41.51	93.268	\$0.00	75-X-0943



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NH23IP922611-05-09

FAIN# NH23IP922611

Federal Award Date: 03/24/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

STATE OF WISCONSIN DEPARTMENT OF HEALTH SERVICES

6 NH23IP922611-05-09

1. Terms & Conditions - Terminate

TERMS AND CONDITIONS OF AWARD

Termination: The purpose of this amendment is to terminate the use of any remaining COVID-19 funding associated with this award. The termination of this funding is for cause. HHS regulations permit termination if “the non-Federal entity fails to comply with the terms and conditions of the award”, or separately, “for cause.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: To ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of use of funding under the listed document number(s) is effective as of the date set out in your Notice of Award.

Impacted document numbers are included on page 2 of this Notice of Award (NoA).

No additional activities can be conducted, and no additional costs may be incurred, as it relates to these funds. Unobligated award balances of COVID-19 funding will be de-obligated by CDC. Award activities under other funding may continue consistent with the terms and conditions of the award.

Final Federal Financial Report (FFR, SF-425): Within 30 days please submit Final FFRs for impacted document numbers. The FFR should only include those funds authorized and expended during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Payment Management System (PMS), you will be required to update your reports to PMS accordingly.

All other terms and conditions of this award remain in effect.



Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment

Federal Award
FAIN# B08TI083973
Federal Award Date
05/17/2021

Recipient Information

1. Recipient Name

HEALTH SERVICES, WISCONSIN
DEPARTMENT OF
1 W WILSON ST RM 651

MADISON, WI 53703

2. Congressional District of Recipient

02

3. Payment System Identifier (ID)

1396006469A1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier

7. Project Director or Principal Investigator

Teresa Steinmetz

Teresaj.Steinmetz@dhs.wisconsin.gov

8. Authorized Official

TeresaJ.Steinmetz@dhs.wisconsin.gov

Federal Agency Information

9. Awarding Agency Contact Information

Wendy Pang
Grants Management Specialist
Center for Substance Abuse Treatment
wendy.pang@samhsa.hhs.gov
(240) 276-1419

10. Program Official Contact Information

Donna Belcher-Barber
Project Officer
Center for Substance Abuse Treatment
donna.belcher-barber@samhsa.hhs.gov
(240) 276-2409

Federal Award Information

11. Award Number

1B08TI083973-01

12. Unique Federal Award Identification Number (FAIN)

B08TI083973

13. Statutory Authority

Subparts II&III,B,Title XIX,PHS Act/45 CFR Part96

14. Federal Award Project Title

Substance Abuse Prevention & Treatment Block Grant

15. Assistance Listing Number

93.959

16. Assistance Listing Program Title

Block Grants for Prevention and Treatment of Substance Abuse

17. Award Action Type

New Competing

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/01/2021 – End Date 09/30/2025

20. Total Amount of Federal Funds Obligated by this Action \$22,016,587

20 a. Direct Cost Amount \$22,016,587

20 b. Indirect Cost Amount \$0

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period \$22,016,587

24. Total Approved Cost Sharing or Matching, where applicable \$0

25. Total Federal and Non-Federal Approved this Budget Period \$22,016,587

26. Project Period Start Date 09/01/2021 – End Date 09/30/2025

27. Total Amount of the Federal Award including Approved Cost \$22,016,587

Sharing or Matching this Project Period

28. Authorized Treatment of Program Income

Additional Costs

29. Grants Management Officer - Signature

Odessa Crocker

30. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Notice of Award



SABG
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Issue Date: 05/17/2021

Center for Substance Abuse Treatment

Award Number: 1B08TI083973-01

FAIN: B08TI083973-01

Contact Person: Teresa Steinmetz

Program: Substance Abuse Prevention & Treatment Block Grant

HEALTH SERVICES, WISCONSIN DEPARTMENT OF
1 W WILSON ST RM 651

MADISON, WI 53703

Award Period: 09/01/2021 – 09/30/2025

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$22,016,587 (see “Award Calculation” in Section I) to HEALTH SERVICES, WISCONSIN DEPARTMENT OF in support of the above referenced project. This award is pursuant to the authority of Subparts II&III,B, Title XIX, PHS Act/45 CFR Part96 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the “Terms and Conditions” is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,
Odessa Crocker
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 1B08TI083973-01

FEDERAL FUNDS APPROVED: \$22,016,587

AMOUNT OF THIS ACTION (FEDERAL SHARE): \$22,016,587

CUMULATIVE AWARDS TO DATE: \$22,016,587

UNAWARDED BALANCE OF CURRENT YEAR’S FUNDS: \$0

Fiscal Information:

CFDA Number: 93.959

EIN: 1396006469A

Document Number: 21B1WISAP TC6

Fiscal Year: 2021

IC	CAN	01
TI	C96D570	\$22,016,587

PCC: SAPT / OC: 4115

SECTION II – PAYMENT/HOTLINE INFORMATION – 1B08TI083973-01

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 1B08TI083973-01

STANDARD TERMS AND CONDITIONS

SABG FY2021 ARPA funding

Remarks:

This Notice of Award (NoA) provides American Rescue Plan Act (ARPA) Supplemental Funding for the Substance Abuse Prevention and Treatment (SABG) Block Grant Program, in accordance with H.R. 1319 - American Rescue Plan Act of 2021. Consistent with HHS Disaster Relief Flexibilities, SAMHSA may waive requirements with respect to allowable activities, timelines, or reporting requirements for the SABG as deemed necessary to facilitate a grantee's response to coronavirus.

A proposal of the state's spending plan must be submitted by July 2, 2021 via the Web Block Grant Application System (WebBGAS). Using the WebBGAS Revision Request for the FFY 2021 Block Grant Application, grantees are required to upload the Plan document (Microsoft Word or pdf), using the associated tab in the State Information Section, Chief Executive Officer's Funding Agreement – Certifications and Assurances/Letter Designating Signatory Authority [SA]. Please title this document "ARPA Funding Plan 2021-SA" (States must upload separate proposals based on MHBG and SABG guidance into the WebBGAS system).

Further information on this is included in the letter from Acting Assistant Secretary for Mental Health and Substance Use, Tom Coderre.

Standard Terms of Award:

1) Acceptance of the Terms of an Award

By drawing or otherwise obtaining funds from the HHS Payment Management System, the recipient acknowledges acceptance of the terms and conditions of the award and is obligated to perform in accordance with the requirements of the award. Except for any waiver granted explicitly elsewhere in this section, this award does not constitute approval for waiver of any Federal statutory/regulatory requirements for a SABG. Once a recipient accepts an award, the contents of the Notice of Award (NoA) are binding on the recipient unless and until modified by a revised NoA signed by the GMO.

Certification Statement:

By drawing down funds, The recipient agrees to abide by the statutory requirements of all sections of the Substance Abuse Prevention and Treatment Block Grant (SABG) (Public Health Service Act, Sections 1921-1935 and sections 1941-1957) (42 U.S.C. 300x-21-300x-35 and 300x-51-300x-67, as amended), and other administrative and legal requirements as applicable for the duration of the award.

2) Availability of Funds

Funds provided under this grant must be obligated and expended by September 30, 2025.

3) Fiscal and administrative requirements

This NoA issued is subject to the administrative requirements for HHS block grants under 45 CFR Part 96, as applicable, and 45 CFR Part 75, as specified. Except for section 75.202 of Subpart C, and sections 75.351 through 75.353 of Subpart D, the requirements in Subpart C, Subpart D, and Subpart E do not apply to this program (reference 45 CFR Part 75 Subpart B, 75.101(d)).

Fiscal control and accounting procedures - Fiscal control and accounting procedures must be sufficient to (a) permit preparation of reports required by the statute authorizing the block grant and (b) permit the tracing of funds to a level of expenditure adequate to establish that such funds have not been used in violation of the restrictions and prohibitions of the statute authorizing the block grant.

ARPA funding is being issued under a separate grant award number and has a unique subaccount in the Payment Management System. Accordingly, ARPA funds must be tracked and reported separately from other FY 2021 awarded funds, including COVID-19 Supplemental funding and the Annual Block Grant Allotment.

Audits - Grantees and subgrantees are responsible for obtaining audits in accordance with the Single Audit Act Amendments of 1996 (31 U.S.C. 7501-7507) and revised OMB Circular A-133, "Audits of State, Local Governments, and Non-Profit Organizations." The audits shall be made by an independent auditor in accordance with generally accepted Government auditing standards covering financial audits.

Except for any waiver granted explicitly elsewhere in this section, this award does not constitute approval for waiver of any Federal statutory/regulatory requirements for a SABG.

4) Flow-down of requirements to sub-recipients

The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients, in accordance with 45 CFR 75.351-75.353, Sub-recipient monitoring and management.

5) Executive Pay

The Consolidated Appropriations Act, 2021 (Public Law 116-260), signed into law on December 27, 2020 restricts the amount of direct salary to Executive Level II of the Federal Executive Pay scale. Effective January 3, 2021, the salary limitation for Executive Level II is \$199,300.

For awards issued prior to this change, if adequate funds are available in active awards, and if the salary cap increase is consistent with the institutional base salary, recipients may re-budget to accommodate the current Executive Level II salary level. However, no additional funds will be provided to these grant awards.

6) Marijuana Restriction:

Grant funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also cannot be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. 75.300(a) (requiring HHS to ensure that Federal funding is expended . . . in full accordance with U.S. statutory . . . requirements.); 21 U.S.C. 812(c) (10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under an FDA-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law.

7) SAM and DUNS Requirements

THIS AWARD IS SUBJECT TO REQUIREMENTS AS SET FORTH IN 2 CFR 25.110 CENTRAL CONTRACTOR REGISTRATION CCR) (NOW SAM) AND DATA UNIVERSAL NUMBER SYSTEM (DUNS) NUMBERS. 2 CFR Part 25 - Appendix A4

System of Award Management (SAM) and Universal Identifier Requirements

A. Requirement for System of Award Management:

Unless you are exempted from this requirement under 2 CFR 25.110, you, as the recipient, must maintain the currency of your information in the SAM, until you submit the final financial report required under this award or receive the final payment, whichever is later. This requires that you review and update the information at least annually after the initial registration, and more frequently if required by changes in your information or another award term.

B. Requirement for unique entity identifier If you are authorized (reference project description) to make subawards under this award, you:

1. Must notify potential subrecipients that no entity (see definition in paragraph C of this award term) may receive a subaward from you, unless the entity has provided its unique entity identifier to you.
2. May not make a subaward to an entity, unless the entity has provided its unique entity identifier to you.

C. Definitions. For purposes of this award term:

1. System of Award Management (SAM) means the federal repository into which an entity must provide information required for the conduct of business as a recipient. Additional information about registration procedures may be found at the SAM Internet site (currently at: <http://www.sam.gov>).
2. Unique entity identifier means the identifier required for SAM registration to uniquely identify business entities.
3. Entity, as it is used in this award term, means all of the following, as defined at 2 CFR Part 25, Subpart C:
 - a. A governmental organization, which is a state, local government, or Indian Tribe;
 - b. A foreign public entity;
 - c. A domestic or foreign nonprofit organization;
 - d. A domestic or foreign for-profit organization; and
 - e. A Federal agency, but only as a sub-recipient under an award or sub-award to a nonfederal entity.
4. Sub-award:
 - a. This term means a legal instrument to provide support for the performance of any portion of the substantive project or program for which you received this award and that you as the recipient award to an eligible sub-recipient.
 - b. The term does not include your procurement of property and services needed to carry out the project or program (for further explanation, see 2 CFR 200.330).
 - c. A sub-award may be provided through any legal agreement, including an agreement that you consider a contract.
5. Sub-recipient means an entity that:
 - a. Receives a sub-award from you under this award; and
 - b. Is accountable to you for the use of the federal funds provided by the sub-award.

8) Federal Financial Accountability and Transparency Act (FFATA)

Reporting Subawards and Executive Compensation, 2 CFR, Appendix A to Part 170

a. Reporting of first tier subawards.

1. Applicability. Unless you are exempt as provided in paragraph d. of this award term, you must report each action that obligates \$25,000 or more in Federal funds that does not include Recovery funds (as defined in section 1512(a)(2) of the American Recovery and Reinvestment Act of 2009, Pub. L. 111-5) for a subaward to an entity (see definitions in paragraph e. of this award term).

2. Where and when to report.

i. You must report each obligating action described in paragraph a.1. of this award term to <http://www.fsrs.gov>.

ii. For subaward information, report no later than the end of the month following the month in which the obligation was made. (For example, if the obligation was made on November 7, 2010, the obligation must be reported by no later than December 31, 2010.)

3. What to report. You must report the information about each obligating action that the submission instructions posted at <http://www.fsrs.gov> specify.

b. Reporting Total Compensation of Recipient Executives.

1. Applicability and what to report. You must report total compensation for each of your five most highly compensated executives for the preceding completed fiscal year, if

i. the total Federal funding authorized to date under this award is \$25,000 or more;

ii. in the preceding fiscal year, you received (A) 80 percent or more of your annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and (B) \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and

iii. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)

2. Where and when to report. You must report executive total compensation described in paragraph b. 1. of this award term:

i. As part of your registration profile at <https://www.sam.gov>.

ii. By the end of the month following the month in which this award is made, and annually thereafter.

c. Reporting of Total Compensation of Subrecipient Executives.

1. Applicability and what to report. Unless you are exempt as provided in paragraph d. of this award term, for each first tier subrecipient under this award, you shall report the names and total compensation of each of the subrecipient's five most highly

compensated executives for the subrecipient's preceding completed fiscal year, if

i. in the subrecipient's preceding fiscal year, the subrecipient received (A) 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and (B) \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards); and

ii. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)

2. Where and when to report. You must report subrecipient executive total compensation described in paragraph c. 1. of this award term:

i. To the recipient.

ii. By the end of the month following the month during which you make the subaward. For example, if a subaward is obligated on any date during the month of October of a given year (i.e., between October 1 and 31), you must report any required compensation information of the subrecipient by November 30 of that year.

d. Exemptions If, in the previous tax year, you had gross income, from all sources, under \$300,000, you are exempt from the requirements to report:

i. Subawards, and

ii. The total compensation of the five most highly compensated executives of any subrecipient.

e. Definitions. For purposes of this award term:

1. Entity means all of the following, as defined in 2 CFR part 25:

i. A Governmental organization, which is a State, local government, or Indian tribe;

ii. A foreign public entity;

iii. A domestic or foreign nonprofit organization;

iv. A domestic or foreign for-profit organization;

v. A Federal agency, but only as a subrecipient under an award or subaward to a non-Federal entity.

2. Executive means officers, managing partners, or any other employees in management positions.

3. Subaward:

i. This term means a legal instrument to provide support for the performance of any portion of the substantive project or program for which you received this award and that you as the recipient award to an eligible subrecipient.

ii. The term does not include your procurement of property and services needed to carry out the project or program (for further explanation, see Sec. __. 210 of the attachment to OMB Circular A-133, Audits of States, Local Governments, and Nonprofit Organizations).

iii. A subaward may be provided through any legal agreement, including an agreement that you or a subrecipient considers a contract.

4. Subrecipient means an entity that: i. Receives a subaward from you (the recipient) under this award; and ii. Is accountable to you for the use of the Federal funds provided by the subaward.

5. Total compensation means the cash and noncash dollar value earned by the executive during the recipient's or subrecipient's preceding fiscal year and includes the following (for more information see 17 CFR 229.402(c)(2)):

i. Salary and bonus.

ii. Awards of stock, stock options, and stock appreciation rights. Use the dollar amount recognized for financial statement reporting purposes with respect to the fiscal year in accordance with the Statement of Financial Accounting Standards No. 123 (Revised 2004) (FAS 123R), Shared Based Payments.

iii. Earnings for services under non-equity incentive plans. This does not include group life, health, hospitalization or medical reimbursement plans that do not discriminate in favor of executives and are available generally to all salaried employees.

iv. Change in pension value. This is the change in present value of defined benefit and actuarial pension plans.

v. Above-market earnings on deferred compensation which is not tax-qualified. vi. Other compensation, if the aggregate value of all such other compensation (e.g. severance, termination payments, value of life insurance paid on behalf of the employee, perquisites or property) for the executive exceeds \$10,000. [75 FR 55669, Sept. 14, 2010, as amended at 79 FR 75879, Dec. 19, 2014]

9) Mandatory Disclosures

Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the HHS Office of Inspector General (OIG), all information related to violations, or suspected violations, of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Subrecipients must disclose, in a timely manner, in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations, or suspected violations, of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Disclosures must be sent in writing to the awarding agency and to the HHS OIG at the following addresses:

U.S. Department of Health and Human Services Office of Inspector General

ATTN: Mandatory Grant Disclosures, Intake Coordinator 330 Independence Avenue, SW, Cohen Building Room 5527 Washington, DC 20201

Fax: (202) 205-0604 (Include "Mandatory Grant Disclosures" in subject line) or email:

MandatoryGranteeDisclosures@oig.hhs.gov

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371 remedies for noncompliance, including suspension or debarment (see 2 CFR parts 180 & 376 and 31 U.S.C. 3321).

10) The Trafficking Victims Protection Act of 2000 (22 U.S.C. 7104(G)), as amended, and 2 C.F.R. PART 175

The Trafficking Victims Protection Act of 2000 authorizes termination of financial assistance provided to a private entity, without penalty to the Federal government, if the recipient or subrecipient engages in certain activities related to trafficking in persons. SAMHSA may unilaterally terminate this award, without penalty, if a private entity recipient, or a private entity subrecipient, or their employees: a) Engage in severe forms of trafficking in persons during the period of time that the award is in effect; b) Procure a commercial sex act during the period of time that the award is in effect; or, c) Use forced labor in the performance of the award or subawards under the award. The text of the full award term is available at 2 C.F.R. 175.15(b). See <http://www.gpo.gov/fdsys/pkg/CFR-2012-title2-vol1/pdf/CFR-2012-title2-vol1-sec175-15.pdf>.

11) Drug-Free Workplace Requirements

The Drug-Free Workplace Act of 1988 (41 U.S.C. 701 et seq.) requires that all organizations receiving grants from any Federal agency agree to maintain a drug-free workplace. When the AR signed the application, the AR agreed that the recipient will provide a drug-free workplace and will comply with the requirement to notify SAMHSA if an employee is convicted of violating a criminal drug statute. Failure to comply with these requirements may be cause for debarment. Government wide requirements for Drug-Free Workplace for Financial Assistance are found in 2 CFR part 182; HHS implementing regulations are set forth in 2 CFR part 382.400. All recipients of SAMHSA grant funds must comply with the requirements in Subpart B (or Subpart C if the recipient is an individual) of Part 382.

12) Lobbying

No funds provided under the attached Notice of Award (NoA) may be used by you or any sub-recipient under the grant to support lobbying activities to influence proposed or pending federal or state legislation or appropriations. The prohibition relates to the use of federal grant funds and is not intended to affect your right or that of any other organization, to petition Congress or any other level of government, through the use of other nonfederal resources. Reference 45 CFR Part 93.

13) Accessibility Provisions

Grant recipients of Federal financial assistance (FFA) from HHS must administer their programs in compliance with Federal civil rights law. This means that recipients of HHS funds must ensure equal access to their programs without regard to a person's race, color, national origin, disability, age, and in some circumstances, sex and religion. This includes ensuring your programs are accessible to persons with limited English proficiency. The HHS Office for Civil Rights also provides guidance on complying with civil rights laws enforced by HHS. Please see

<http://www.hhs.gov/ocr/civilrights/understanding/section1557/index.html>. Recipients of FFA also have specific legal obligations for serving qualified individuals with disabilities. Please see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>. Please contact the HHS Office for Civil Rights for more information about obligations and prohibitions under Federal civil rights laws at <https://www.hhs.gov/civil-rights/index.html> or call 1-800-368-1019 or TDD 1-800-537-7697. Also note that it is an HHS Departmental goal to ensure access to quality, culturally competent care, including long-term services and supports, for vulnerable populations. For further guidance on providing culturally and linguistically appropriate services, recipients should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=1&lvlid=6>.

14) Audits

Non-Federal recipients that expend \$750,000 or more in federal awards during the recipient's fiscal year must obtain an audit conducted for that year in accordance with the provisions of 45 CFR 96.31.

Recipients are responsible for submitting their Single Audit Reports and the Data Collections Forms (SF-FAC) electronically to the to the Federal Audit Clearinghouse Visit disclaimer page (FAC) within the earlier of 30 days after receipt or nine months after the FY s end of the audit period. The FAC operates on behalf of the OMB.

For specific questions and information concerning the submission process: Visit the Federal Audit Clearinghouse at <https://harvester.census.gov/facweb> or Call FAC at the toll-free number: (800) 253-0696

Reporting Requirements:

Federal Financial Report (FFR)

The recipient is required to submit a Federal Financial Report (FFR) 90 days after the close of the performance period (project period). The SF-425 shall report total funds obligated and total funds expended by the grantee.

Effective January 1, 2021, award recipients are required to submit the SF-425 Federal Financial Report (FFR) via the Payment Management System (PMS). If the individual responsible for FFR submission does not already have an account with PMS, please [contact PMS](#) to obtain access.

Recipients must liquidate all obligations incurred under an award not later than ninety (90) days after the end of the award obligation and expenditure period (i.e., the project period) which also coincides with the due date for submission of the FINAL SF-425, *Federal Financial Report* (FFR). After ninety (90) days, letter of credit accounts are locked. SAMHSA does not approve extensions to the ninety (90) day post-award reconciliation/liquidation period. Therefore, recipients are expected to complete all work and reporting within the approved project period and the aforementioned 90-day post-award reconciliation/liquidation period. Recipients (late) withdrawal requests occurring after the aforementioned periods are denied. In rare instances, SAMHSA

may approve an extension to submit a FINAL SF-425 FFR report, but this is *not* an extension of the 90-day post award reconciliation/liquidation period, but rather only an extension to submit the Final SF-425 report (FFR).

Annual Report

Reporting on the ARPA funding is required. States must prepare and submit their respective reports utilizing WebBGAS. Failure to comply with these requirements may cause the initiation of enforcement actions that can culminate in discontinuation of SABG grants.

Your assigned SABG Program Official will provide further guidance and additional submission information.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

Staff Contacts:

Donna Belcher-Barber, Program Official

Phone: (240) 276-2409 **Email:** donna.belcher-barber@samhsa.hhs.gov

Wendy Pang, Grants Specialist

Phone: (240) 276-1419 **Email:** wendy.pang@samhsa.hhs.gov **Fax:** (240) 276-1430

From: [Dike, Kendralyn \(SAMHSA/CSAT\)](#)
To: [Robertson, Joannette S - DHS](#); [Foley, Hannah E - DHS](#)
Subject: FW: B08TI083973: Termination Notice for COVID-19 Grant Funding
Date: Tuesday, March 25, 2025 7:12:12 AM

**CAUTION: This email originated from outside the organization.
Do not click links or open attachments unless you recognize the sender and know the content is safe.**

Kendralyn Dike, MPH

Public Health Advisor

Substance Abuse and Mental Health Services Administration

United States Department of Health and Human Services

Cell: (202) 779-1593

From: wendy.pang@samhsa.hhs.gov <wendy.pang@samhsa.hhs.gov>
Sent: Monday, March 24, 2025 5:39 PM
To: Teresaj.Steinmetz@dhs.wisconsin.gov; Teresaj.Steinmetz@dhs.wisconsin.gov
Cc: Dike, Kendralyn (SAMHSA/CSAT) <Kendralyn.Dike@samhsa.hhs.gov>; Pang, Wendy (SAMHSA/OFR) <Wendy.Pang@samhsa.hhs.gov>; eracorrespondence@od.nih.gov
Subject: B08TI083973: Termination Notice for COVID-19 Grant Funding

Dear Single State Authority Director and State Mental Health Commissioner,

During the COVID-19 pandemic, the Substance Abuse Mental Health Services Administration (SAMHSA) awarded several pandemic-related grants including the funded [Coronavirus Preparedness and Response Supplemental Appropriations Act](#), 2020 (H.R.6074) (CRRSA) which provided funds to respond to the coronavirus outbreak and the [American Rescue Plan](#) (ARP) Act of 2021(H.R. 1319) which provided additional relief to address the continued impact of COVID-19 (i.e., coronavirus disease 2019) on the economy, public health, state and local governments, individuals, and businesses.

On April 10, 2023, President Biden signed [PL 188-3](#) terminating the national emergency concerning the COVID-19 pandemic. Consistent with the President's Executive Order 14222, Implementing the President's "Department of Government Efficiency" Cost Efficiency Initiative requiring a comprehensive review of SAMHSA grants, and where appropriate and consistent with applicable law, terminate such grants to reduce the overall Federal spending **this grant is being terminated effective March 24, 2025**. These grants were issued for a limited purpose: To ameliorate the effects of the pandemic. The end of the pandemic provides cause to terminate COVID-related grants. Now that the pandemic is over, the grants are no longer necessary.

In accordance with 45 CFR 96.30 (4), block grant award recipients are required to provide a Financial Status Report (FFR) within 90 days of the close of the applicable statutory grant period. Recipients must liquidate all obligations incurred under an award after the end of the award obligation and expenditure period (i.e., the project period) which also coincides with the due date for submission of the FINAL SF-425, Federal Financial Report (FFR). Reimbursements after termination are allowable if it results from obligations which were properly incurred before the effective date of this termination.

Recipients are expected to complete all work immediately and the reconciliation/liquidation process no later than 90-days after the award period end date.

The related Payment Management System accounts will be restricted from drawdown going further. Additional information will be provided in the revised Notice of Award that will be issued to initiate the award period end date.

[[Correspondence Token: d0c777e2-e86f-4001-9f5e-240b314ac14d]] -- Do not delete or change this line. --

Please "Reply All" and do NOT delete eracorrespondence@nih.gov from the list of recipients or change the subject line.

From: wendy.pang@samhsa.hhs.gov
To: Teresaj.Steinmetz@dhs.wisconsin.gov; Robertson, Joannette S - DHS
Cc: kendralyn.dike@samhsa.hhs.gov; wendy.pang@samhsa.hhs.gov; eracorrespondence@od.nih.gov
Subject: B08TI083973: Block Grant Termination Notice for COVID-19 Awards (CRRSA and ARP)
Date: Friday, March 28, 2025 11:51:21 AM
Attachments: [95-8648 BG hearing procedure.pdf](#)

**CAUTION: This email originated from outside the organization.
Do not click links or open attachments unless you recognize the sender and know the content is safe.**

Dear Single State Authority Director and State Mental Health Commissioner,

You received notification on March 24, 2025, that your award was being terminated. This notice replaces and supersedes the previous notice.

During the COVID-19 pandemic, the Substance Abuse and Mental Health Services Administration (SAMHSA) awarded several pandemic-related grants funded by the [Coronavirus Response and Relief Supplemental Appropriations Act](#) (CRRSA) which provided funds to respond to the coronavirus outbreak and the [American Rescue Plan](#) (ARP) Act which provided additional relief to address the continued impact of COVID-19.

The termination of this award is for cause. The block grant provisions at [42 U.S.C. §300x-55](#) permit termination if the state “has materially failed to comply with the agreements or other conditions required for the receipt of a grant under the program involved.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of this award is effective as of 11:59PM EDT, March 24, 2025.

In accordance with [45 CFR 96.30 \(4\)](#), block grant award recipients are required to provide a Financial Status Report (FFR) no later than 90 calendar days after March 24, 2025. Recipients must liquidate all obligations incurred under an award no later than 90 calendar days after March 24, 2025, which also coincides with the due date for submission of the FINAL SF-425, Federal Financial Report (FFR). Reimbursements after termination are allowable if the reimbursements result from obligations which were properly incurred on or before March 24, 2025.

Recipients are expected to cease all activities immediately and complete the reconciliation/liquidation process no later than 90 calendar days after the termination effective date.

Opportunity for Hearing:

Per the enclosed hearing procedures, block grant recipients may request a hearing to dispute this decision by submitting a written notice to the Substance Abuse and Mental Health Services Administration (SAMHSA) requesting a hearing within 15 calendar days of the date of this notice to: SAMHSAgrants@samhsa.hhs.gov. The request for a hearing must include a

copy of this termination notice and a brief statement of why this decision should not be upheld.

Enclosure

[[Correspondence Token: f9444167-bd5c-4789-b463-1e3f4fa7bd72]] -- Do not delete or change this line. --

Please "Reply All" and do NOT delete eracorrespondence@nih.gov from the list of recipients or change the subject line.



Recipient Information

1. Recipient Name

HEALTH SERVICES, WISCONSIN
DEPARTMENT OF
1 W WILSON ST RM 651

MADISON, WI 53703

C. Congressional District of Recipient 02

2. Payment System Identifier (ID)

1396006469A1

4. Employer Identification Number (EIN)

396006469

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier

7. Project Director or Principal Investigator

Teresa Steinmetz

TeresaJ.Steinmetz@dhs.wisconsin.gov

8. Authorized Official

TeresaJ.Steinmetz@dhs.wisconsin.gov

Federal Agency Information

9. Awarding Agency Contact Information

Wendy Pang
Grants Management Specialist
Center for Mental Health Services
wendy.pang@samhsa.hhs.gov
(240) 276-1419

10. Program Official Contact Information

Jim Kretz

Center for Mental Health Services
Jim.Kretz@samhsa.hhs.gov
240-276-1755

Federal Award Information

11. Award Number

1B09SM085381-01

1C. Unique Federal Award Identification Number (FAIN)

B09SM085381

12. Statutory Authority

Subparts I&III,B,Title XIX,PHS Act/45 CFR Part96

14. Federal Award Project Title

Block Grants for Community Mental Health Services

15. Assistance Listing Number

93.958

16. Assistance Listing Program Title

Block Grants for Community Mental Health Services

17. Award Action Type

New Competing

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/01/2021 – End Date 09/30/2025

C0. Total Amount of Federal Funds Obligated by this Action \$24,630,652

20 a. Direct Cost Amount \$24,630,652

20 b. Indirect Cost Amount \$0

C1. Authorized Carryover

C2. Offset

C2. Total Amount of Federal Funds Obligated this budget period \$24,630,652

C4. Total Approved Cost Sharing or Matching, where applicable \$0

C5. Total Federal and Non-Federal Approved this Budget Period \$24,630,652

C6. Project Period Start Date 09/01/2021 – End Date 09/30/2025

C7. Total Amount of the Federal Award including Approved Cost \$24,630,652

Sharing or Matching this Project Period

C8. Authorized Treatment of Program Income

Additional Costs

C9. Grants Management Officer - Signature

Odessa Crocker

20. Remarks

Acceptance of this award, including the "Terms and Conditions," is acknowledged by the recipient when funds are drawn down or otherwise requested from the grant payment system.

Notice of Award



MHBG
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Issue Date: 05/17/2021

Center for Mental Health Services

Award Number: 1B09SM085381-01

FAIN: B09SM085381-01

Contact Person: Teresa Steinmetz

Program: Block Grants for Community Mental Health Services

HEALTH SERVICES, WISCONSIN DEPARTMENT OF
1 W WILSON ST RM 651

MADISON, WI 53703

Award Period: 09/01/2021 – 09/30/2025

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$24,630,652 (see “Award Calculation” in Section I) to HEALTH SERVICES, WISCONSIN DEPARTMENT OF in support of the above referenced project. This award is pursuant to the authority of Subparts I&III,B, Title XIX, PHS Act/45 CFR Part96 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the “Terms and Conditions” is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,
Odessa Crocker
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 1B08S3 097-91M1

FEDERAL FUNDS APPROVED: \$24,630,652

A3 OUNT OF THIS ACTION (FEDERAL SHARE): \$24,630,652

CUMULATIVE AWARDS TO DATE: \$24,630,652

UNAWARDED BALANCE OF CURRENT YEAR’S FUNDS: \$0

Fiscal Information:

CFDA Number: 93.958

EIN: 1396006469A

Document 21B1WICMH

Number: SC6

Fiscal Year: 2021

IC	CAN	01
SM	C96D540	\$24,630,652

PCC: CMHS / OC: 4115

SECTION II – PAY3 ENT/HOTLINE INFOR3 ATION – 1B08S3 097-91M1

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TER3 S AND CONDITIONS – 1B08S3 097-91M1

STANDARD TER3 S AND CONDITIONS

3 HBG FY2021 ARPA funding

Remarks:

This Notice of Award (NoA) provides American Rescue Plan Act of 2021 (ARPA) funding for the Community Mental Health Services (MHBG) Block Grant Program, in accordance with H.R. 1319 – American Rescue Plan Act of 2021 the ARPA Act, 2021 [P.L. 117-2]. Consistent with HHS Disaster Relief Flexibilities, SAMHSA may waive requirements with respect to allowable activities, timelines, or reporting requirements for the MHBG, as deemed necessary to facilitate a grantee's response to coronavirus.

A proposal of the state's spending plan must be submitted by July 2, 2021 via the Web Block Grant Application System (WebBGAS).

Using the WebBGAS Revision Request for the FFY 2021 Block Grant Application, grantees are required to upload the Plan document (Microsoft Word or pdf), using the associated tab in the State Information Section, Chief Executive Officer's Funding Agreement – Certifications and Assurances/Letter Designating Signatory Authority [MH]. Please title this document "ARPA Funding Plan 2021-MH". States must upload separate proposals based on MHBG and SABG guidance into the WebBGAS system.

Further information on this is included in the letter from Acting Assistant Secretary for Mental Health and Substance Use, Tom Coderre

Standard Terms of Award:

1) Acceptance of the Terms of an Award

By drawing or otherwise obtaining funds from the HHS Payment Management System, the recipient acknowledges acceptance of the terms and conditions of the award and is obligated to perform in accordance with the requirements of the award. Except for any waiver granted explicitly elsewhere in this section, this award does not constitute approval for waiver of any Federal statutory/regulatory requirements for a MHBG. Once an award is accepted by a recipient, the contents of the Notice of Award (NoA) are binding on the recipient unless and until modified by a revised NoA signed by the GMO.

Certification Statement: By drawing down funds, The recipient agrees to abide by the statutory requirements of all sections of the Mental Health Block Grant (MHBG) (Public Health Service Act, Sections 1911-1920 and sections 1941-1957) (42 U.S.C. 300x-1-300x-9 and 300x-51-300x-67, as amended), and other administrative and legal requirements as applicable for the duration of the award.

2) Official Form Designee

The States Chief Executive Officer, or authorized designee is considered the official form designee for this grant. The SAMHSA GMS and the MHBG Program Officer must be notified immediately before any changes in this key position are made. Please note that individuals that are suspended or debarred are prohibited from serving on Federal grant awards.

-) Availability of Funds

Funds provided under this grant must be obligated and expended by September 30, 2025.

q) Fiscal and administrative requirements

This award is subject to the administrative requirements for HHS block grants under 45 CFR Part 96, Subpart C, and 45 CFR Part 75, as specified. Except for section 75.202 of Subpart C, and sections 75.351 through 75.353 of Subpart D, the requirements in Subpart C, Subpart D, and Subpart E do not apply to this program (reference 45 CFR Part 75 Subpart B, 75.101(d)).

Fiscal control and accounting procedures - Fiscal control and accounting procedures must be sufficient to (a) permit preparation of reports required by the statute authorizing the block grant and (b) permit the tracing of funds to a level of expenditure adequate to establish that such funds have not been used in violation of the restrictions and prohibitions of the statute authorizing the block grant.

ARPA funding is being issued under a separate grant award number and has a unique subaccount in the Payment Management System. Accordingly, ARPA funds must be tracked and reported separately from other FY 2021 awarded funds, including COVID-19 Supplemental funding and the Annual Block Grant Allotment.

Audits - Grantees and subgrantees are responsible for obtaining audits in accordance with the Single Audit Act Amendments of 1996 (31 U.S.C. 7501-7507) and revised OMB Circular A-133, "Audits of State, Local Governments, and Non-Profit Organizations." The audits shall be made by an independent auditor in accordance with generally accepted Government auditing standards covering financial audits.

7) Flowdown of requirements to subrecipients

The grantee, as the awardee organization, is legally and financially responsible for all aspects of this award including funds provided to sub-recipients, in accordance with 45 CFR 75.351-75.353, Sub-recipient monitoring and management.

5) Early Serious Mental Illness Set-Aside

The 21st Century Cures Act, P.L. 114-255 amended Section 1920(c) of the Public Health Service Act (42 U.S.C. 300x 9(c)). States must set-aside not less than 10 percent of their total MHBG allocation amount for each fiscal year to support evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders, regardless of the age of the individual at onset. In lieu of expending 10 percent of the amount, the State receives for a fiscal year, states have the flexibility to expend not less than 20 percent of such amount by the end of the succeeding fiscal year.

x) Executive Pay

The Consolidated Appropriations Act, 2021 (Public Law 116-260), signed into law on December 27, 2020 restricts the amount of direct salary to Executive Level II of the Federal Executive Pay scale. Effective January 3, 2021, the salary limitation for Executive Level II is \$199,300.

For awards issued prior to this change, if adequate funds are available in active awards, and if the salary cap increase is consistent with the institutional base salary, recipients may re-budget to accommodate the current Executive Level II salary level. However, no additional funds will be provided to these grant awards.

9) Marijuana Restriction:

Grant funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also cannot be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. 75.300(a) (requiring HHS to ensure that Federal funding is expended . . . in full accordance with U.S. statutory . . . requirements.); 21 U.S.C. 812(c) (10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under an FDA-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law.

8) SA3 and DUNS Re4uirements

THIS AWARD IS SUBJECT TO REQUIREMENTS AS SET FORTH IN 2 CFR 25.110 CENTRAL CONTRACTOR REGISTRATION CCR) (NOW SAM) AND DATA UNIVERSAL NUMBER SYSTEM (DUNS) NUMBERS. 2 CFR Part 25 - Appendix A4

System of Award Management (SAM) and Universal Identifier Requirements

A. Requirement for System of Award Management:

Unless you are exempted from this requirement under 2 CFR 25.110, you, as the recipient, must maintain the currency of your information in the SAM, until you submit the final financial report required under this award or receive the final payment, whichever is later. This requires that you review and update the information at least annually after the initial registration, and more frequently if required by changes in your information or another award term.

B. Requirement for unique entity identifier If you are authorized (reference project description) to make subawards under this award, you:

1. Must notify potential subrecipients that no entity (see definition in paragraph C of this award term) may receive a subaward from you, unless the entity has provided its unique entity identifier to you.
2. May not make a subaward to an entity, unless the entity has provided its unique entity identifier to you.

C. Definitions. For purposes of this award term:

1. System of Award Management (SAM) means the federal repository into which an entity must provide information required for the conduct of business as a recipient. Additional information about registration procedures may be found at the SAM Internet site (currently at: <http://www.sam.gov>).
2. Unique entity identifier means the identifier required for SAM registration to uniquely identify business entities.
3. Entity, as it is used in this award term, means all of the following, as defined at 2 CFR Part 25, Subpart C:
 - a. A governmental organization, which is a state, local government, or Indian Tribe; b. A foreign public entity; c. A domestic or foreign nonprofit organization; d. A domestic or foreign for-profit organization; and e. A Federal agency, but only as a sub-recipient under an award or sub-award to a nonfederal entity.
4. Sub-award:

a. This term means a legal instrument to provide support for the performance of any portion of the substantive project or program for which you received this award and that you as the recipient award to an eligible sub-recipient. b. The term does not include your procurement of property and services needed to carry out the project or program (for further explanation, see 2 CFR 200.330). c. A sub-award may be provided through any legal agreement, including an agreement that you consider a contract.

5. Sub-recipient means an entity that: a. Receives a sub-award from you under this award; and b. Is accountable to you for the use of the federal funds provided by the sub-award.

(10) Federal Financial Accountability and Transparency Act (FFATA)

Reporting Subawards and Executive Compensation, 2 CFR, Appendix A to Part 170

a. Reporting of first tier subawards.

1. Applicability. Unless you are exempt as provided in paragraph d. of this award term, you must report each action that obligates \$25,000 or more in Federal funds that does not include Recovery funds (as defined in section 1512(a)(2) of the American Recovery and Reinvestment Act of 2009, Pub. L. 111-5) for a subaward to an entity (see definitions in paragraph e. of this award term).

2. Where and when to report.

i. You must report each obligating action described in paragraph a.1. of this award term to <http://www.fsrs.gov>.

ii. For subaward information, report no later than the end of the month following the month in which the obligation was made. (For example, if the obligation was made on November 7, 2010, the obligation must be reported by no later than December 31, 2010.)

3. What to report. You must report the information about each obligating action that the submission instructions posted at <http://www.fsrs.gov> specify.

b. Reporting Total Compensation of Recipient Executives.

1. Applicability and what to report. You must report total compensation for each of your five most highly compensated executives for the preceding completed fiscal year, if

i. the total Federal funding authorized to date under this award is \$25,000 or more;

ii. in the preceding fiscal year, you received (A) 80 percent or more of your annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and (B) \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and

iii. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation

information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)

2. Where and when to report. You must report executive total compensation described in paragraph b. 1. of this award term:

i. As part of your registration profile at <https://www.sam.gov>.

ii. By the end of the month following the month in which this award is made, and annually thereafter.

c. Reporting of Total Compensation of Subrecipient Executives.

1. Applicability and what to report. Unless you are exempt as provided in paragraph d. of this award term, for each first tier subrecipient under this award, you shall report the names and total compensation of each of the subrecipient's five most highly compensated executives for the subrecipient's preceding completed fiscal year, if

i. in the subrecipient's preceding fiscal year, the subrecipient received (A) 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and (B) \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards); and

ii. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)

2. Where and when to report. You must report subrecipient executive total compensation described in paragraph c. 1. of this award term:

i. To the recipient.

ii. By the end of the month following the month during which you make the subaward. For example, if a subaward is obligated on any date during the month of October of a given year (i.e., between October 1 and 31), you must report any required compensation information of the subrecipient by November 30 of that year.

d. Exemptions If, in the previous tax year, you had gross income, from all sources, under \$300,000, you are exempt from the requirements to report:

i. Subawards, and

ii. The total compensation of the five most highly compensated executives of any subrecipient.

e. Definitions. For purposes of this award term:

1. Entity means all of the following, as defined in 2 CFR part 25:

i. A Governmental organization, which is a State, local government, or Indian tribe;

ii. A foreign public entity;

- iii. A domestic or foreign nonprofit organization;
 - iv. A domestic or foreign for-profit organization;
 - v. A Federal agency, but only as a subrecipient under an award or subaward to a non-Federal entity.
2. Executive means officers, managing partners, or any other employees in management positions.
3. Subaward:
- i. This term means a legal instrument to provide support for the performance of any portion of the substantive project or program for which you received this award and that you as the recipient award to an eligible subrecipient.
 - ii. The term does not include your procurement of property and services needed to carry out the project or program (for further explanation, see Sec. __. 210 of the attachment to OMB Circular A-133, Audits of States, Local Governments, and Nonprofit Organizations).
 - iii. A subaward may be provided through any legal agreement, including an agreement that you or a subrecipient considers a contract.
4. Subrecipient means an entity that: i. Receives a subaward from you (the recipient) under this award; and ii. Is accountable to you for the use of the Federal funds provided by the subaward.
5. Total compensation means the cash and noncash dollar value earned by the executive during the recipient's or subrecipient's preceding fiscal year and includes the following (for more information see 17 CFR 229.402(c)(2)):
- i. Salary and bonus.
 - ii. Awards of stock, stock options, and stock appreciation rights. Use the dollar amount recognized for financial statement reporting purposes with respect to the fiscal year in accordance with the Statement of Financial Accounting Standards No. 123 (Revised 2004) (FAS 123R), Shared Based Payments.
 - iii. Earnings for services under non-equity incentive plans. This does not include group life, health, hospitalization or medical reimbursement plans that do not discriminate in favor of executives and are available generally to all salaried employees.
 - iv. Change in pension value. This is the change in present value of defined benefit and actuarial pension plans.
 - v. Above-market earnings on deferred compensation which is not tax-qualified.
 - vi. Other compensation, if the aggregate value of all such other compensation (e.g. severance, termination payments, value of life insurance paid on behalf of the employee, perquisites or property) for the executive exceeds \$10,000. [75 FR 55669, Sept. 14, 2010, as amended at 79 FR 75879, Dec. 19, 2014]

11) 3 andatory Disclosures

Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the HHS Office of Inspector General (OIG), all information

related to violations, or suspected violations, of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Subrecipients must disclose, in a timely manner, in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations, or suspected violations, of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Disclosures must be sent in writing to the awarding agency and to the HHS OIG at the following addresses:

U.S. Department of Health and Human Services Office of Inspector General

ATTN: Mandatory Grant Disclosures, Intake Coordinator 330 Independence Avenue, SW, Cohen Building Room 5527 Washington, DC 20201

Fax: (202) 205-0604 (Include "Mandatory Grant Disclosures" in subject line) or email: MandatoryGranteeDisclosures@oig.hhs.gov

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371 remedies for noncompliance, including suspension or debarment (see 2 CFR parts 180 & 376 and 31 U.S.C. 3321).

12) The Trafficking Victims Protection Act of 2000 (22 U.S.C. x10q(G)), as amended, and 2 C.F.R. PART 1x7

The Trafficking Victims Protection Act of 2000 authorizes termination of financial assistance provided to a private entity, without penalty to the Federal government, if the recipient or subrecipient engages in certain activities related to trafficking in persons. SAMHSA may unilaterally terminate this award, without penalty, if a private entity recipient, or a private entity subrecipient, or their employees: a) Engage in severe forms of trafficking in persons during the period of time that the award is in effect; b) Procure a commercial sex act during the period of time that the award is in effect; or, c) Use forced labor in the performance of the award or subawards under the award. The text of the full award term is available at 2 C.F.R. 175.15(b). See <http://www.gpo.gov/fdsys/pkg/CFR-2012-title2-vol1/pdf/CFR-2012-title2-vol1-sec175-15.pdf>.

1-) Drug-Free Workplace Requirements

The Drug-Free Workplace Act of 1988 (41 U.S.C. 701 et seq.) requires that all organizations receiving grants from any Federal agency agree to maintain a drug-free workplace. When the AR signed the application, the AR agreed that the recipient will provide a drug-free workplace and will comply with the requirement to notify SAMHSA if an employee is convicted of violating a criminal drug statute. Failure to comply with these requirements may be cause for debarment. Government wide requirements for Drug-Free Workplace for Financial Assistance are found in 2 CFR part 182; HHS implementing regulations are set forth in 2 CFR part 382.400. All recipients of SAMHSA grant funds must comply with the requirements in Subpart B (or Subpart C if the recipient is an individual) of Part 382.

1q) Lobbying

No funds provided under the attached Notice of Award (NoA) may be used by you or any sub-recipient under the grant to support lobbying activities to influence proposed or pending federal or state legislation or appropriations. The prohibition relates to the

use of federal grant funds and is not intended to affect your right or that of any other organization, to petition Congress or any other level of government, through the use of other nonfederal resources. Reference 45 CFR Part 93.

17) Accessibility Provisions

Grant recipients of Federal financial assistance (FFA) from HHS must administer their programs in compliance with Federal civil rights law. This means that recipients of HHS funds must ensure equal access to their programs without regard to a person's race, color, national origin, disability, age, and in some circumstances, sex and religion. This includes ensuring your programs are accessible to persons with limited English proficiency. The HHS Office for Civil Rights also provides guidance on complying with civil rights laws enforced by HHS. Please see <http://www.hhs.gov/ocr/civilrights/understanding/section1557/index.html>. Recipients of FFA also have specific legal obligations for serving qualified individuals with disabilities. Please see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>. Please contact the HHS Office for Civil Rights for more information about obligations and prohibitions under Federal civil rights laws at <https://www.hhs.gov/civil-rights/index.html> or call 1-800-368-1019 or TDD 1-800-537-7697. Also note that it is an HHS Departmental goal to ensure access to quality, culturally competent care, including long-term services and supports, for vulnerable populations. For further guidance on providing culturally and linguistically appropriate services, recipients should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=1&lvlid=6>.

15) Audits

Non-Federal recipients that expend \$750,000 or more in federal awards during the recipient's fiscal year must obtain an audit conducted for that year in accordance with the provisions of 45 CFR 96.31.

Recipients are responsible for submitting their Single Audit Reports and the Data Collections Forms (SF-FAC) electronically to the Federal Audit Clearinghouse Visit disclaimer page (FAC) within the earlier of 30 days after receipt or nine months after the FY's end of the audit period. The FAC operates on behalf of the OMB.

For specific questions and information concerning the submission process: Visit the Federal Audit Clearinghouse at <https://harvester.census.gov/facweb> or Call FAC at the toll-free number: (800) 253-0696

Reporting Requirements:

Federal Financial Report (FFR)

The recipient is required to submit a Federal Financial Report (FFR) 90 days after the close of the performance period (project period). The SF-425 shall report total funds obligated and total funds expended by the grantee.

Effective January 1, 2021, award recipients are required to submit the SF-425 Federal Financial Report (FFR) via the Payment Management System (PMS). If the individual

responsible for FFR submission does not already have an account with PMS, please [contact PMS](#) to obtain access.

Recipients must liquidate all obligations incurred under an award not later than ninety (90) days after the end of the award obligation and expenditure period (i.e., the project period) which also coincides with the due date for submission of the FINAL SF-425, *Federal Financial Report* (FFR). After ninety (90) days, letter of credit accounts are locked. SAMHSA does not approve extensions to the ninety (90) day post-award reconciliation/liquidation period. Therefore, recipients are expected to complete all work and reporting within the approved project period and the aforementioned 90-day post-award reconciliation/liquidation period. Recipients (late) withdrawal requests occurring after the aforementioned periods are denied. In rare instances, SAMHSA may approve an extension to submit a FINAL SF-425 FFR report, but this is *not* an extension of the 90-day post award reconciliation/liquidation period, but rather only an extension to submit the Final SF-425 report (FFR).

Annual Report

Reporting on the ARPA funding is required. States must prepare and submit their respective reports utilizing WebBGAS. Failure to comply with these requirements may cause the initiation of enforcement actions that can culminate in discontinuation of MHBG grants.

Your assigned MHBG Program Official will provide further guidance and additional submission information.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

Staff Contacts:

Jim Kretz, Program Official

Phone: 240-276-1755 **Email:** Jim.Kretz@samhsa.hhs.gov

Wendy Pang, Grants Specialist

Phone: (240) 276-1419 **Email:** wendy.pang@samhsa.hhs.gov **Fa6:** (240) 276-1430

From: [Myers, Bethaney \(SAMHSA/CMHS\)](#)
To: [Foley, Hannah E - DHS](#); [Scheurer, Brenda S - DHS](#); [Cram, Jason M - DHS](#); [Krogulski, Kevin M - DHS](#)
Subject: FW: B09SM085381: Termination Notice for COVID-19 Grant Funding
Date: Tuesday, March 25, 2025 8:42:01 AM

**CAUTION: This email originated from outside the organization.
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This is the other email pertaining to the one I just sent

Bethaney Myers, MPH, MCHES
240-276-1579
Bethaney.Myers@samhsa.hhs.gov

From: katrina.morgan@samhsa.hhs.gov <katrina.morgan@samhsa.hhs.gov>
Sent: Monday, March 24, 2025 5:50 PM
To: Teresaj.Steinmetz@dhs.wisconsin.gov; Teresaj.Steinmetz@dhs.wisconsin.gov
Cc: Myers, Bethaney (SAMHSA/CMHS) <Bethaney.Myers@samhsa.hhs.gov>; Pang, Wendy (SAMHSA/OFR) <Wendy.Pang@samhsa.hhs.gov>; eracorrespondence@od.nih.gov
Subject: B09SM085381: Termination Notice for COVID-19 Grant Funding

Dear Single State Authority Director and State Mental Health Commissioner,

During the COVID-19 pandemic, the Substance Abuse and Mental Health Services Administration (SAMHSA) awarded several pandemic-related grants including the funded [Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020](#) (H.R.6074) (CRRSA) which provided funds to respond to the coronavirus outbreak and the [American Rescue Plan](#) (ARP) Act of 2021(H.R. 1319) which provided additional relief to address the continued impact of COVID-19 (i.e., coronavirus disease 2019) on the economy, public health, state and local governments, individuals, and businesses.

On April 10, 2023, President Biden signed [PL 188-3](#) terminating the national emergency concerning the COVID-19 pandemic. Consistent with the President's Executive Order 14222, Implementing the President's "Department of Government Efficiency" Cost Efficiency Initiative requiring a comprehensive review of SAMHSA grants, and where appropriate and consistent with applicable law, terminate such grants to reduce the overall Federal spending **this grant is being terminated effective March 24, 2025.** These grants were issued for a limited purpose: To ameliorate the effects of the pandemic. The end of the pandemic provides cause to terminate COVID-related grants. Now that the pandemic is over, the grants are no longer necessary.

In accordance with [45 CFR 96.30 \(4\)](#), block grant award recipients are required to provide a Financial Status Report (FFR) within 90 days of the close of the applicable statutory grant period. Recipients must liquidate all obligations incurred under an award after the end of the award obligation and expenditure period (i.e., the project period) which also coincides with the due date for submission of the FINAL SF-425, Federal Financial Report (FFR). Reimbursements after termination are allowable if it results from obligations which were properly incurred before the effective date of this termination.

Recipients are expected to complete all work immediately and the reconciliation/liquidation process no later than 90-days after the award period end date.

The related Payment Management System accounts will be restricted from drawdown going further. Additional information will be provided in the revised Notice of Award that will be issued to initiate the award period end date.

[[Correspondence Token: a7ebc15a-1154-4953-9c66-4b6084966661]] -- Do not delete or change this line. --

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From: [Flaherty, Maura S - DHS](#)
To: [Berg, Michael T - DHS \(Mike\)](#)
Subject: FW: B09SM085381: Block Grant Termination Notice for COVID-19 Awards (CRRSA and ARP)
Date: Friday, March 28, 2025 5:23:32 PM
Attachments: [95-8648 BG hearing procedure.pdf](#)
[image001.png](#)
[image003.png](#)
[image004.png](#)
[image005.png](#)
[image006.png](#)
[image007.png](#)

Maura S. Flaherty
Chief Legal Counsel

Wisconsin Department of Health Services

D: 608-266-2460



NOTICE: [Get the most up to date confidentiality statement here.](#)

From: Audley, Holly O - DHS <HollyO.Audley@dhs.wisconsin.gov>
Sent: Friday, March 28, 2025 12:13 PM
To: Krupski, Paul A - DHS <Paul.Krupski@dhs.wisconsin.gov>; Kuettel, Vanessa A - DHS <vanessa.kuettel@dhs.wisconsin.gov>; Flaherty, Maura S - DHS <maura.flaherty@dhs.wisconsin.gov>; Austin, Sam V - DHS <sam.austin@dhs.wisconsin.gov>; Miller, Angela K - DHS <angelak.miller@dhs.wisconsin.gov>
Subject: FW: B09SM085381: Block Grant Termination Notice for COVID-19 Awards (CRRSA and ARP)

From: Cram, Jason M - DHS <Jason.Cram@dhs.wisconsin.gov>
Sent: Friday, March 28, 2025 12:08 PM
To: Steele, Gynger S - DHS <gynger.steele@dhs.wisconsin.gov>; Audley, Holly O - DHS <HollyO.Audley@dhs.wisconsin.gov>; Robertson, Joannette S - DHS <Joannette.Robertson@dhs.wisconsin.gov>
Subject: FW: B09SM085381: Block Grant Termination Notice for COVID-19 Awards (CRRSA and ARP)

This was just sent from SAMHSA.

From: katrina.morgan@samhsa.hhs.gov <katrina.morgan@samhsa.hhs.gov>
Sent: Friday, March 28, 2025 12:06 PM
To: Teresaj.Steinmetz@dhs.wisconsin.gov; Cram, Jason M - DHS <Jason.Cram@dhs.wisconsin.gov>
Cc: bethaney.myers@samhsa.hhs.gov; wendy.pang@samhsa.hhs.gov; eracorrespondence@od.nih.gov

Subject: B09SM085381: Block Grant Termination Notice for COVID-19 Awards (CRRSA and ARP)

**CAUTION: This email originated from outside the organization.
Do not click links or open attachments unless you recognize the sender and know the content is safe.**

Dear Single State Authority Director and State Mental Health Commissioner,

You received notification on March 24, 2025, that your award was being terminated. This notice replaces and supersedes the previous notice.

During the COVID-19 pandemic, the Substance Abuse and Mental Health Services Administration (SAMHSA) awarded several pandemic-related grants funded by the [Coronavirus Response and Relief Supplemental Appropriations Act](#) (CRRSA) which provided funds to respond to the coronavirus outbreak and the [American Rescue Plan](#) (ARP) Act which provided additional relief to address the continued impact of COVID-19.

The termination of this award is for cause. The block grant provisions at [42 U.S.C. §300x-55](#) permit termination if the state “has materially failed to comply with the agreements or other conditions required for the receipt of a grant under the program involved.” The end of the pandemic provides cause to terminate COVID-related grants and cooperative agreements. These grants and cooperative agreements were issued for a limited purpose: to ameliorate the effects of the pandemic. Now that the pandemic is over, the grants and cooperative agreements are no longer necessary as their limited purpose has run out. Termination of this award is effective as of 11:59PM EDT, March 24, 2025.

In accordance with [45 CFR 96.30 \(4\)](#), block grant award recipients are required to provide a Financial Status Report (FFR) no later than 90 calendar days after March 24, 2025. Recipients must liquidate all obligations incurred under an award no later than 90 calendar days after March 24, 2025, which also coincides with the due date for submission of the FINAL SF-425, Federal Financial Report (FFR). Reimbursements after termination are allowable if the reimbursements result from obligations which were properly incurred on or before March 24, 2025.

Recipients are expected to cease all activities immediately and complete the reconciliation/liquidation process no later than 90 calendar days after the termination effective date.

Opportunity for Hearing:

Per the enclosed hearing procedures, block grant recipients may request a hearing to dispute this decision by submitting a written notice to the Substance Abuse and Mental Health Services Administration (SAMHSA) requesting a hearing within 15 calendar days of the date of this notice to: SAMHSAgrants@samhsa.hhs.gov. The request for a hearing must include a copy of this termination notice and a brief statement of why this decision should not be upheld.

Enclosure

[[Correspondence Token: 0de08c18-6981-4ef0-9262-f01062a74a9f]] -- Do not delete or change this line. --

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